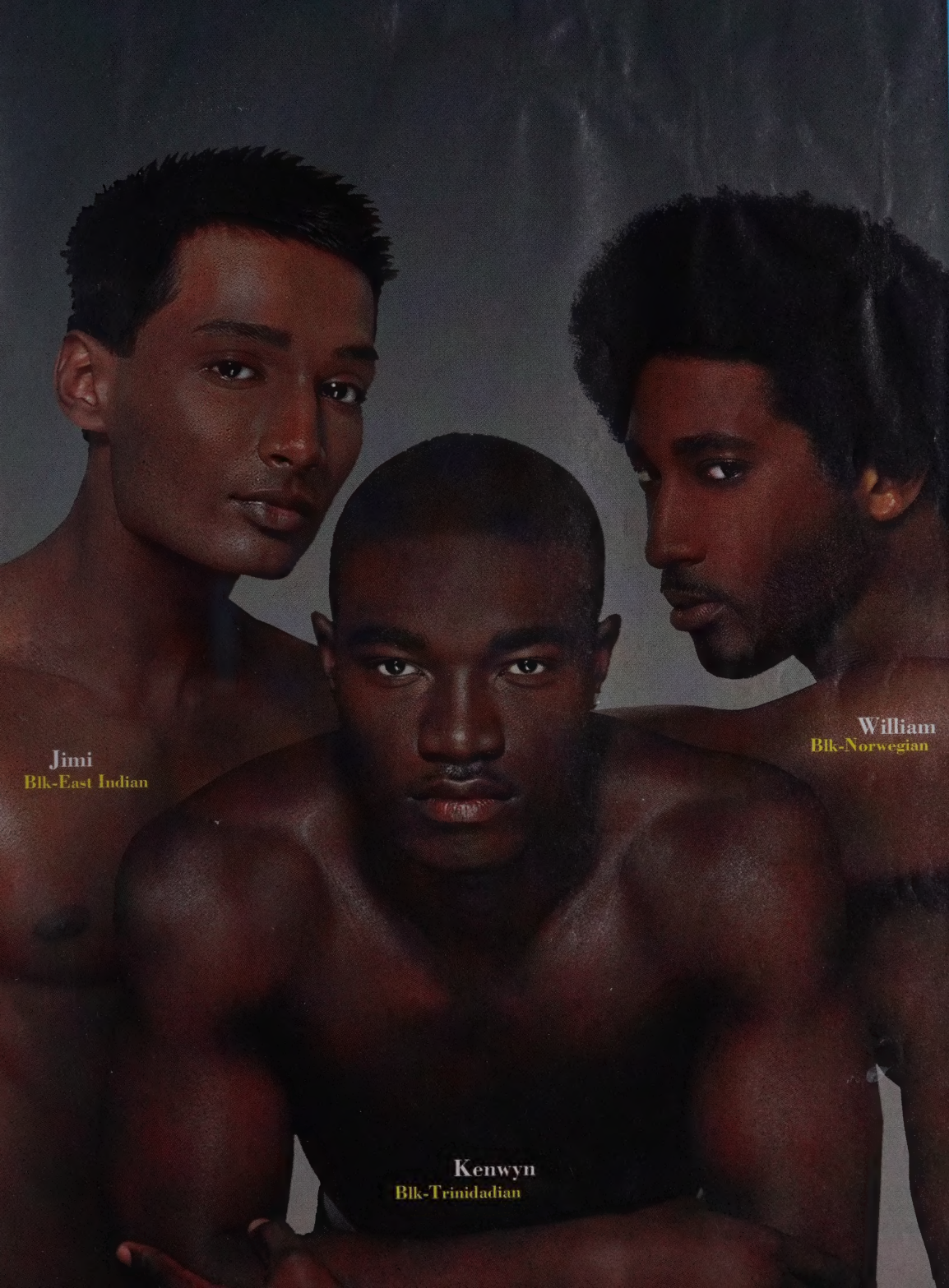
PULSE

THE HEARTBEAT OF BLACK GAY AMERICA

PRIDE '07

OUR VOICES OUR VIEW OUR WORLD

Isaac
Blk-Native American
Raphael
Blk-Egyptian
Lawrence
Blk-Italian


Jimi
Blk-East Indian
William
Blk-Norwegian
Kenwyn
Blk-Trinidadian

PATIENT INFORMATION

℞ ONLY

ATRIPLA™ (uh TRIP luh) Tablets

ALERT: Find out about medicines that should NOT be taken with ATRIPLA (efavirenz 600 mg/emtricitabine 200 mg/ tenofovir disoproxil fumarate 300 mg).

Please also read the section **"MEDICINES YOU SHOULD NOT TAKE WITH ATRIPLA."**

Generic name: efavirenz, emtricitabine and tenofovir disoproxil fumarate (eh FAH vih renz, em tri SIT uh bean and te NOE' fo veer dye soe PROX il FYOU mar ate)

Read the Patient Information that comes with ATRIPLA before you start taking it and each time you get a refill since there may be new information. This information does not take the place of talking to your healthcare provider about your medical condition or treatment. You should stay under a healthcare provider's care when taking ATRIPLA. **Do not change or stop your medicine without first talking with your healthcare provider.** Talk to your healthcare provider or pharmacist if you have any questions about ATRIPLA.

What is the most important information I should know about ATRIPLA?

- **Some people who have taken medicine like ATRIPLA (which contains nucleoside analogs) have developed a serious condition called lactic acidosis** (build up of an acid in the blood). Lactic acidosis can be a medical emergency and may need to be treated in the hospital. **Call your healthcare provider right away if you get the following signs or symptoms of lactic acidosis:**
  - You feel very weak or tired.
  - You have unusual (not normal) muscle pain.
  - You have trouble breathing.
  - You have stomach pain with nausea and vomiting.
  - You feel cold, especially in your arms and legs.
  - You feel dizzy or lightheaded.
  - You have a fast or irregular heartbeat.
- **Some people who have taken medicines like ATRIPLA have developed serious liver problems called hepatotoxicity,** with liver enlargement (hepatomegaly) and fat in the liver (steatosis). **Call your healthcare provider right away if you get the following signs or symptoms of liver problems:**
  - Your skin or the white part of your eyes turns yellow (jaundice).
  - Your urine turns dark.
  - Your bowel movements (stools) turn light in color.
  - You don't feel like eating food for several days or longer.
  - You feel sick to your stomach (nausea).
  - You have lower stomach area (abdominal) pain.
- **You may be more likely to get lactic acidosis or liver problems** if you are female, very overweight (obese), or have been taking nucleoside analog-containing medicines, like ATRIPLA, for a long time.
- **If you also have Hepatitis B Virus (HBV) infection and you stop taking ATRIPLA, you may get a "flare-up" of your hepatitis. A "flare-up" is when the disease suddenly returns in a worse way than before.** Patients with HBV who stop taking ATRIPLA need close medical follow-up for several months, including medical exams and blood tests to check for hepatitis that could be getting worse. ATRIPLA is not approved for the treatment of HBV, so you must discuss your HBV therapy with your healthcare provider.

What is ATRIPLA?

ATRIPLA contains 3 medicines, SUSTIVA® (efavirenz), EMTRIVA® (emtricitabine) and VIREAD® (tenofovir disoproxil fumarate also called tenofovir DF) combined in one pill. EMTRIVA and VIREAD are HIV (human immunodeficiency virus) nucleoside analog reverse transcriptase inhibitors (NRTIs) and SUSTIVA is an HIV non-nucleoside analog reverse transcriptase inhibitor (NNRTI). VIREAD and EMTRIVA are the components of TRUVADA®. ATRIPLA can be used alone as a complete regimen, or in combination with other anti-HIV medicines to treat people with HIV infection. ATRIPLA is for adults age 18 and over. ATRIPLA has not been studied in children under age 18 or adults over age 65.

HIV infection destroys CD4 (T) cells, which are important to the immune system. The immune system helps fight infection. After a large number of T cells are destroyed, acquired immune deficiency syndrome (AIDS) develops.

ATRIPLA (efavirenz 600 mg/emtricitabine 200 mg/tenofovir disoproxil fumarate 300 mg) helps block HIV reverse transcriptase, a viral chemical in your body (enzyme) that is needed for HIV to multiply. ATRIPLA lowers the amount of HIV in the blood (viral load). ATRIPLA (efavirenz 600 mg/emtricitabine 200 mg/tenofovir disoproxil fumarate 300 mg) may also help to increase the number of T cells (CD4 cells), allowing your immune system to improve. Lowering the amount of HIV in the blood lowers the chance of death or infections that happen when your immune system is weak (opportunistic infections).

Does ATRIPLA cure HIV-1 or AIDS?

ATRIPLA does not cure HIV infection or AIDS. The long-term effects of ATRIPLA are not known at this time. People taking ATRIPLA may still get opportunistic infections or other conditions that happen with HIV infection. Opportunistic infections are infections that develop because the immune system is weak. Some of these conditions are pneumonia, herpes virus infections, and *Mycobacterium avium complex* (MAC) infection. **It is very important that you see your healthcare provider regularly while taking ATRIPLA.**

Does ATRIPLA reduce the risk of passing HIV-1 to others?

ATRIPLA has not been shown to lower your chance of passing HIV to other people through sexual contact, sharing needles, or being exposed to your blood.

- **Do not share needles or other injection equipment.**
- **Do not share personal items that can have blood or body fluids on them, like toothbrushes or razor blades.**
- **Do not have any kind of sex without protection.** Always practice safer sex by using a latex or polyurethane condom or other barrier to reduce the chance of sexual contact with semen, vaginal secretions, or blood.

Who should not take ATRIPLA?

Together with your healthcare provider, you need to decide whether ATRIPLA is right for you.

Do not take ATRIPLA if you are allergic to ATRIPLA or any of its ingredients. The active ingredients of ATRIPLA are efavirenz, emtricitabine, and tenofovir DF. See the end of this leaflet for a complete list of ingredients.

What should I tell my healthcare provider before taking ATRIPLA?

Tell your healthcare provider if you:

- **Are pregnant or planning to become pregnant** (see "What should I avoid while taking ATRIPLA?").
- **Are breast-feeding** (see "What should I avoid while taking ATRIPLA?").
- **Have kidney problems or are undergoing kidney dialysis treatment.**
- **Have bone problems.**
- **Have liver problems, including Hepatitis B Virus infection.** Your healthcare provider may want to do tests to check your liver while you take ATRIPLA.
- **Have ever had mental illness or are using drugs or alcohol.**
- **Have ever had seizures or are taking medicine for seizures.**

What important information should I know about taking other medicines with ATRIPLA?

ATRIPLA may change the effect of other medicines, including the ones for HIV, and may cause serious side effects. Your healthcare provider may change your other medicines or change their doses. Other medicines, including herbal products, may affect ATRIPLA. For this reason, **it is very important to** let all your healthcare providers and pharmacists know what medications, herbal supplements, or vitamins you are taking.

MEDICINES YOU SHOULD NOT TAKE WITH ATRIPLA

- The following medicines may cause serious and life-threatening side effects when taken with ATRIPLA. You should not take any of these medicines while taking ATRIPLA: Hismanol® (astemizole), Propulsid® (cisapride), Versed® (midazolam), Halcion® (triazolam), ergot medications (for example, Wigraine® and Cafergot®).
- ATRIPLA also should not be used with COMBIVIR®, EMTRIVA, EPIVIR®, EPIVIR-HBV®, EPZICOM™, TRIZIVIR®, SUSTIVA, TRUVADA®, or VIREAD.
- Vfend® (voriconazole) should not be taken with ATRIPLA since it may lose its effect or may increase the chance of having side effects from ATRIPLA.

It is also important to tell your healthcare provider if you are taking any of the following:

- Fortovase®, Invirase® (saquinavir), or Biaxin® (clarithromycin); **these medicines may need to be replaced with another medicine when taken with ATRIPLA.**
- Crixivan® (indinavir); Methadone; Mycobutin® (rifabutin); Rifampin; cholesterol-lowering medicines such as Lipitor® (atorvastatin), PRAVACHOL® (pravastatin), and Zocor® (simvastatin); or Zoloft® (sertraline); **these medicines may need to have their dose changed when taken with ATRIPLA.**
- Videx®, Videx® EC (didanosine); tenofovir DF (a component of ATRIPLA) may increase the amount of didanosine in your blood, which could result in more side effects. **You may need to be monitored more carefully** if you are taking ATRIPLA and didanosine together. Also, the dose of didanosine may need to be changed.
- Reyataz® (atazanavir sulfate) or Kaletra® (lopinavir/ritonavir); these medicines may increase the amount of tenofovir DF (a component of ATRIPLA) in your blood, which could result in more side effects. **You may need to be monitored more carefully** if you are taking ATRIPLA and either Reyataz or Kaletra together. Also, the dose of Reyataz or Kaletra may need to be changed.
- Medicine for seizures [for example, Dilantin® (phenytoin), Tegretol® (carbamazepine), or phenobarbital]; your healthcare provider may want to switch you to another medicine or check drug levels in your blood from time to time.
- **Taking St. John's wort (*Hypericum perforatum*), or products containing St. John's wort with ATRIPLA is not recommended.** St. John's wort is a herbal product sold as a dietary supplement. Talk with your healthcare provider if you are taking or are planning to take St. John's wort. Taking St. John's wort may decrease ATRIPLA levels and lead to increased viral load and possible resistance to ATRIPLA or cross-resistance to other anti-HIV drugs.

These are not all the medicines that may cause problems if you take ATRIPLA (efavirenz 600 mg/emtricitabine 200 mg/ tenofovir disoproxil fumarate 300 mg). Be sure to tell your healthcare provider about all medicines that you take.

Keep a complete list of all the prescription and nonprescription medicines as well as any herbal remedies that you are taking, how much you take, and how often you take them. Make a new list when medicines or herbal remedies are added or stopped, or if the dose changes. Give copies of this list to all of your healthcare providers and pharmacists **every** time you visit your healthcare provider or fill a prescription. This will give your healthcare provider a complete picture of the medicines you use. Then he or she can decide the best approach for your situation.

How should I take ATRIPLA?

- Take the exact amount of ATRIPLA your healthcare provider prescribes. Never change the dose on your own. Do not stop this medicine unless your healthcare provider tells you to stop.
- You should take ATRIPLA on an empty stomach.
- Swallow ATRIPLA with water.
- Taking ATRIPLA at bedtime may make some side effects less bothersome.
- Do not miss a dose of ATRIPLA. If you forget to take ATRIPLA, take the missed dose right away, unless it is almost time for your next dose. Do not double the next dose. Carry on with your regular dosing schedule. If you need help in planning the best times to take your medicine, ask your healthcare provider or pharmacist.
- If you believe you took more than the prescribed amount of ATRIPLA, contact your local poison control center or emergency room right away.
- Tell your healthcare provider if you start any new medicine or change how you take old ones. Your doses may need adjustment.
- When your ATRIPLA supply starts to run low, get more from your healthcare provider or pharmacy. This is very important because the amount of virus in your blood may increase if the medicine is stopped for even a short time. The virus may develop resistance to ATRIPLA and become harder to treat.
- Your healthcare provider may want to do blood tests to check for certain side effects while you take ATRIPLA.

What should I avoid while taking ATRIPLA?

- **Women taking ATRIPLA should not become pregnant.** Serious birth defects have been seen in the babies of animals and women treated with efavirenz (a component of ATRIPLA) during pregnancy. It is not known whether efavirenz caused these defects. **Tell your healthcare provider right away if you are pregnant.** Also talk with your healthcare provider if you want to become pregnant.
- Women should not rely only on hormone-based birth control, such as pills, injections, or implants, because ATRIPLA may make these contraceptives ineffective. Women must use a reliable form of barrier contraception, such as a condom or diaphragm, even if they also use other methods of birth control.
- **Do not breast-feed if you are taking ATRIPLA.** The Centers for Disease Control and Prevention recommend that mothers with HIV not breast-feed because they can pass the HIV through their milk to the baby. Also, ATRIPLA may pass through breast milk and cause serious harm to the baby. Talk with your healthcare provider if you are breast-feeding. You should stop breast-feeding or may need to use a different medicine.
- Taking ATRIPLA (efavirenz 600 mg/emtricitabine 200 mg/tenofovir disoproxil fumarate 300 mg) with alcohol or other medicines causing similar side effects as ATRIPLA, such as drowsiness, may increase those side effects.
- Do not take any other medicines, including prescription and nonprescription medicines and herbal products, without checking with your healthcare provider.
- **Avoid doing things that can spread HIV infection** since ATRIPLA does not stop you from passing the HIV infection to others.

What are the possible side effects of ATRIPLA?

ATRIPLA may cause the following serious side effects:

- **Lactic acidosis** (buildup of an acid in the blood). Lactic acidosis can be a medical emergency and may need to be treated in the hospital. **Call your healthcare provider right away if you get signs of lactic acidosis.** (See "What is the most important information I should know about ATRIPLA?")
- **Serious liver problems (hepatotoxicity),** with liver enlargement (hepatomegaly) and fat in the liver (steatosis). Call your healthcare provider right away if you get any signs of liver problems. (See "What is the most important information I should know about ATRIPLA?")
- **"Flare-ups" of Hepatitis B Virus (HBV) infection,** in which the disease suddenly returns in a worse way than before, can occur if you have HBV and you stop taking ATRIPLA. Your healthcare provider will monitor your condition for several months after stopping ATRIPLA if you have both HIV and HBV infection and may recommend treatment for your HBV.
- **Serious psychiatric problems.** A small number of patients may experience severe depression, strange thoughts, or angry behavior while taking ATRIPLA. Some patients have thoughts of suicide and a few have actually committed suicide. These problems may occur more often in patients who have had mental illness. Contact your healthcare provider right away if you think you are having these psychiatric symptoms, so your healthcare provider can decide if you should continue to take ATRIPLA.
- **Kidney problems.** If you have had kidney problems in the past or take other medicines that can cause kidney problems, your healthcare provider should do regular blood tests to check your kidneys.
- **Changes in bone mineral density (thinning bones).** It is not known whether long-term use of ATRIPLA will cause damage to your bones. If you have had bone problems in the past, your healthcare provider may need to do tests to check your bone mineral density or may prescribe medicines to help your bone mineral density.

Common side effects:

Patients may have dizziness, headache, trouble sleeping, drowsiness, trouble concentrating, and/or unusual dreams during treatment with ATRIPLA. These side effects may be reduced if you take ATRIPLA at bedtime on an empty stomach. They also tend to go away after you have taken the medicine for a few weeks. If you have these common side effects, such as dizziness, it does not mean that you will also have serious psychiatric problems, such as severe depression, strange thoughts, or angry behavior. Tell your healthcare provider right away if any of these side effects continue or if they bother you. It is possible that these symptoms may be more severe if ATRIPLA is used with alcohol or mood altering (street) drugs.

If you are dizzy, have trouble concentrating, or are drowsy, avoid activities that may be dangerous, such as driving or operating machinery.

Rash may be common. Rashes usually go away without any change in treatment. In a small number of patients, rash may be serious. If you develop a rash, call your healthcare provider right away.

Other common side effects include tiredness, upset stomach, vomiting, gas, and diarrhea.

Other possible side effects with ATRIPLA include:

- Changes in body fat. Changes in body fat develop in some patients taking anti-HIV medicine. These changes may include an increased amount of fat in the upper back and neck ("buffalo hump"), in the breasts, and around the trunk. Loss of fat from the legs, arms, and face may also happen. The cause and long-term health effects of these fat changes are not known.
- Skin discoloration (small spots or freckles) may also happen with ATRIPLA.

Tell your healthcare provider or pharmacist if you notice any side effects while taking ATRIPLA.

Contact your healthcare provider before stopping ATRIPLA because of side effects or for any other reason.

This is not a complete list of side effects possible with ATRIPLA. Ask your healthcare provider or pharmacist for a more complete list of side effects of ATRIPLA and all the medicines you will take.

How do I store ATRIPLA?

- **Keep ATRIPLA and all other medicines out of reach of children.**
- Store ATRIPLA at room temperature 77 °F (25 °C).
- Keep ATRIPLA in its original container and keep the container tightly closed.
- Do not keep medicine that is out of date or that you no longer need. If you throw any medicines away make sure that children will not find them.

General information about ATRIPLA:

Medicines are sometimes prescribed for conditions that are not mentioned in patient information leaflets. Do not use ATRIPLA for a condition for which it was not prescribed. Do not give ATRIPLA to other people, even if they have the same symptoms you have. It may harm them.

This leaflet summarizes the most important information about ATRIPLA. If you would like more information, talk with your healthcare provider. You can ask your healthcare provider or pharmacist for information about ATRIPLA that is written for health professionals.

Do not use ATRIPLA if the seal over bottle opening is broken or missing.

What are the ingredients of ATRIPLA?

Active Ingredients: efavirenz, emtricitabine, and tenofovir disoproxil fumarate

Inactive Ingredients: croscarmellose sodium, hydroxypropyl cellulose, microcrystalline cellulose, magnesium stearate, sodium lauryl sulfate. The film coating contains black iron oxide, polyethylene glycol, polyvinyl alcohol, red iron oxide, talc, and titanium dioxide.

℞ ONLY

July 2006

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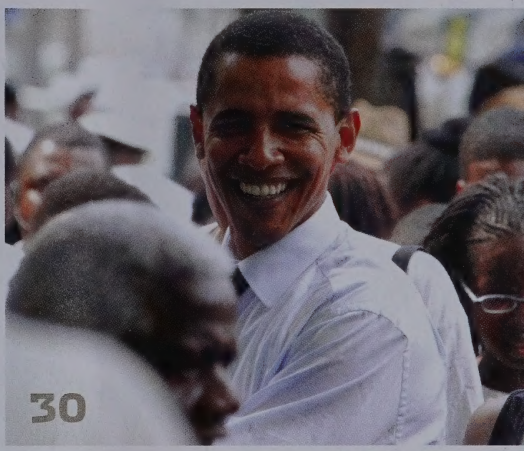

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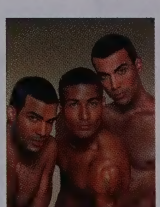
ON THE COVER: *It's what we call "the remix"—nine jaw-dropping stunners—all beautiful brothers of the* ***African Diaspora****. A celebrated mix of Black and multiracial cultures, mores, and customs from around the globe that are distinctly diverse, yet bound by a common thread—their searing* ***blackness****. Great looks begin with great products from IMAN Time Control: Skin Refresher Lotion and Oil-free Moisture Complex SPF 15, Pro-Line Barber Select, and Giorgio Armani "Attitude" Pour Homme.*



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LETTER FROM THE EDITOR

THE HUMAN RACE has journeyed far from its origin in Africa—the cradle of civilization; whose arts and culture have influenced the world today. Now, more than ever, we are moving toward a multicultural, multiethnic global society. The men appearing on this issue's cover are stirring depictions of the uniqueness, beauty, and strength of our brave new world. Each reflects a distinct diversity that exists within the African Diaspora, although it's our blackness that weaves us together in brotherhood. Here within, PULSE celebrates the morphing of ancestry and homeland—all the more deepening our roots with the creation of Italian, Norwegian, Colombian, Slovakian, Panamanian, Trinidadian, East Indian, Egyptian, and Native American men of color. This issue is dedicated to highlighting our Pride in cultural, racial, and sexual multiplicity.

Inside our biggest issue yet, you'll read a PULSE exclusive with Presidential hopeful, Senator **Barack Obama** whose politics focuses on addressing concerns in our community *(pg. 30)*. Hear first-hand about the amazing celebrity event designer **Preston Bailey** and his rags to riches story *(pg. 43)* and get charged to renew your call to action for gay rights by Jamaican poet and political activist **Staceyann Chin** *(pg. 16)*. Each outstanding personality reminds us of our interconnectedness. They are stellar forerunners in their plights to inspire everyone to embrace their differences and be courageous in creating a world that is just and inclusive.

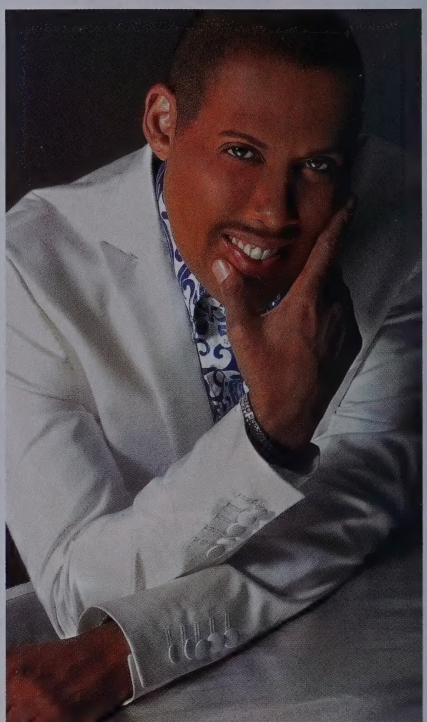
As usual, PULSE brings you thought-provoking features: **Gay Bars**, the unadulterated real deal about gay life in prison *(pg. 28)* and **Saving Face** which provides insight on restorative treatments to undo AIDS-related facial wasting *(pg. 19)*. We are also excited to introduce new lighthearted musings like **Gaybonics**, a dictionary to help decipher gay terms and expressions *(pg. 33)*. Finally, grab your bowl, mix it up, and **Toss My Salad** with our food and furnishing. It's a delicious way to go *green* this summer *(pg. 82)*.

While self-made millionaire, media mogul, and author **Russell Simmons** steps up his game to impart choice words of wisdom *(pg. 36)*, I encourage you to find time to explore each and every page of PULSE, embrace all of our diversity, and welcome those differences shared by others. Be unapologetic in celebrating your individuality as you move forward through your day-to-day encounters, and as Mr. Simmons would say DO YOU! for all the world to see.

Celebrate!

Byron Barnes

BYRON BARNES, EDITOR-IN-CHIEF



Photographed by Fadil Berisha

"The human race has journeyed far from its origin in Africa; whose arts and culture have influenced the world today. Now, more than ever, we are moving toward a multicultural, multiethnic global society."

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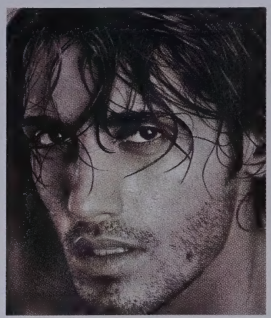
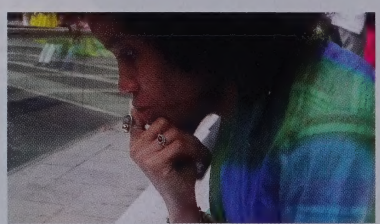
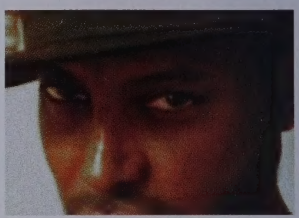


Brazilian-born **Luiz Antonio** has an amazing gift comparable to the great David LaChapelle. His fantasy-like images have been seen in major campaigns, like for J.Lo fragrance and Avon, as well as in a controversial biblical-themed fashion story called "Jesus Wept" for London's Drum magazine. Luiz Antonio, a former model for Armani, now puts 101% of his amazing talent and energy into his true love, photography. Luxe (pg. 22) and Garden Party (pg. 59) are captured through the lens of Mr. Antonio.

John Paul Sánchez, M.D., M.P.H. is a second-year resident of the Emergency Medicine Program at Jacobi/Montefiore Medical Center in the Bronx. Born and raised in New York City, John holds a Masters in Public Health in Infectious Disease Epidemiology and is a member of the Syphilis Advisory Group of the N.Y.C. Department of Health and Mental Hygiene. Read Dr. Sánchez's eye-opening essay Silent Outbreak (pg. 50).

Staceyann Chin is an out poet and political activist. A proud Jamaican national, her heritage-rich well-versed intricately woven wisdom receives rousing international acclaim from one-woman tours, slams, and workshops. Staceyann co-wrote and performed in the Tony Award-winning Russell Simmons Def Poetry Jam on Broadway. Her musings have been in many publications including The New York Times, Jane, NY Newsday, The Washington Blade, The South African Times, and The Jamaican Gleaner, among others. Catch Ms. Chin's pulsating story Catalyst 4 Change (pg. 16).



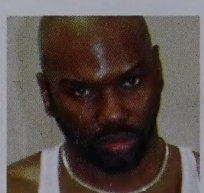


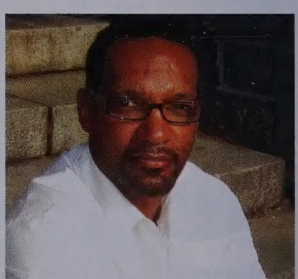
Veteran fashion stylist and dynamo **Llewellyn Jenkins** joins PULSE as the Fashion Director after formerly serving in that capacity for BET. Llewellyn has enhanced the visuals of A-list celebrities, photographers, and publications alike. His clients include Michael Jordan, Iman, Will Smith, Ruven Afanador, Keith Majors, Fabrizio Gianni, Cosmopolitan, Spanish Vogue, DNR, and Marie Claire, just to name a few. Inspired by travel to Paris and the Mediterranean, our fashion features Garden Party (pg. 59) and Ship's Ahoy (page 70) are laced with Mr. Jenkins' signature.

Having written national advertisements for IMAN Cosmetics & Skincare seen in Essence and People En Español, **Zulekha Haywood** is PULSE's go-to writer for savvy editorial. Her passionate philosophy: "The mark of flawless style is not in the ability to put together a look, but in the unapologetic formula of its owner...." Currently, Ms. Haywood is penning her first novel. Meanwhile, White Heat (pg. 38) and The Naturalist (pg. 88) are her words to live by.

William Elliot Springfield who hails from Boston, Massachusetts started his career in fashion as a model, The Naturalist (pg. 88), but is breaking ground as a talented new up and coming photographer, Killah Shorts (pg. 66), in New York City. His editorials have appeared in MR, LA'G, and PROPHECY magazines. Now bicoastal, it's no surprise that William is being sought by a wave of celebrity clientele. Undoubtedly, his name is one that you will be hearing a lot of.

Acclaimed writer **L. Michael Gipson** is also an award-winning youth advocate. For his contributions in public health, Michael received awards from the N.A.A.C.P. and the Black AIDS Institute. His socio-political essays have been published in two recent anthologies, to include "Emerging Agendas: The Best of Poverty and Race 2001-2005." On the music scene, Michael has profiled artists online for RHYTHMflow.net and currently writes for SoulTracks.com. Mr. Gipson's sobering report is uncovered in Gay Bars (pg. 28).





For over 20 years, **Terence Taitt** has been a freelance fashion show producer and stage manager. He helped produce the 2004 GMAD menswear fashion show at his alma mater, the Fashion Institute of Technology, where he studied accessories, lighting, and set design. For PULSE, Terence offers his talents as a production assistant, caterer, and food stylist for Garden Party (pg. 59) and writer for Gaybonics (pg. 33). A former model, Mr. Taitt is currently opening a model/talent agency.

2007 Black Pride Events

Pride In The City
Brooklyn, NY
August 2-5
www.prideinthecity.com

Toronto Black Pride
Toronto, Ontario, Canada
August 3-5
www.torontoblackpride.com

Indiana Black Gay Pride
Indianapolis, IN
August 8-11
www.indianablackpride.com

Jacksonville Black Pride
Jacksonville, FL
August 10-12
www.jaxxblackpride.com

Minnesota GLBT Soul Essence
Minnesota, MN
August 10-13
www.soulessenceminnesota.org

Milwaukee Black Pride
Milwaukee, WI
August 12-19
www.blackpridecdp.com

Bay Area Black In The Life
Oakland, CA
August 16-19
www.bbitl.net

St. Louis Black Pride
St. Louis, MO
August 17-19
www.stlouisblackpride.org

Atlanta Black Gay Pride
Atlanta, GA
August 29-September 3
www.inthelifeatl.com

Dallas Southern Pride
Dallas, TX
September 27-30
www.dallasblackpride.com

Baltimore Black Gay Pride
Baltimore, MD
October 5-7
www.bmoreblackpride.org

Jackson Black Pride
Jackson, MS
October 18-21
www.mbk-inc.org

Shreveport Black Pride
Shreveport, LA
October 25-27
www.shreveportpride.com

Nashville Black Pride
Nashville, TN
October 26-28
www.brothersunited.com/blackpride.htm

PULSE
THE HEARTBEAT OF BLACK GAY AMERICA

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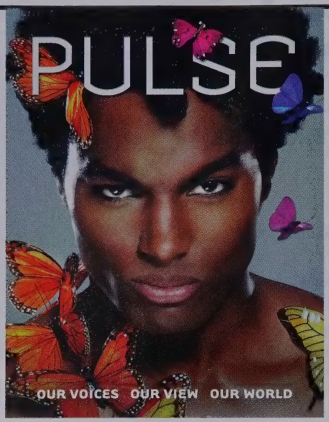

"I am pleased to finally see single black men represented in a positive light. I, personally, find it refreshing to be finally recognized in a self-affirming and totally healthy way."

BRIAN BENJAMIN WRIGHT, *Washington, DC.*

We Got Read!

You guys *Got Game!* I absolutely adored your spring issue. I was a little uncomfortable with the make-up on the models in the first issue, but this time around, it was more subtle. My friends and I often wonder why relationships are so fleeting and hard to maintain in our community. The article on polyamory *(3's Company)* was so riveting and got me thinking that perhaps many of us have been looking at the 1-on-1 construct to guide us in relationships with other men. I have started investigating other polyamorous guys in my area, but so far only non-black guys have shown interest. I am not giving up though. Thanks for a great issue and look forward to the next.

SCOT PETERS
Ft. Lauderdale, FL

Your spring issue was educational, informative, and quite entertaining and that is no mean feat. The men and the fashion spread kept me engaged throughout. Rarely do I read a magazine from cover to cover. I did this time. Heavenly sculpted fitness trainer, Ulisses *(Fit4Life)*, and eye-candy artist, Zuberi Zahur *(Hung)*, will satiate my dark chocolate fetish for a long time to come, and their articles were informative to boot.

LARRY CALHOUN
Capitol Heights, MD

I received the spring issue a few days ago and I was stunned that you guys managed to outdo the first issue *(which I thought was ground-breaking)*. As a black gay man who works with runaway youth, many of whom are gay and lesbian, the article on sexual molestation *(It's All Relative)* sounded all too familiar. I was happy to read that not all those who are abused by the adults in their lives end up being mental cases. Many have come and gone, and I hope PULSE is around for a long time.

CLARENCE BROWNE
London, UK

I am pleased to finally see single black men represented in a positive light. For far too long, we have been marginalized by the gay community as a whole and I, personally, find it refreshing to be finally recognized in a self-affirming and totally healthy way. Imagine my surprise, when upon calling the magazine, none other than the editor-in-chief himself answered the phone! Such accessibility to the community-at-large is rare. I personally enjoyed *Holla Back* with Carnell. You don't see us giving us any kind of relationship advice ANYWHERE... kudos. Your articles on HIV are dead on *(no pun intended)* and we need to start taking responsibility for our own community.

BRIAN BENJAMIN WRIGHT
Washington, DC

Congrats! The magazine looks great! I was actually very positively surprised to see the turn it's taken. Many of the features were very engaging and eye opening in a lot of ways, too. The photography is of the highest quality. Wonderful job, guys!

SAMUEL ROBERTS
New York, NY

I just came from the Black Pride in my hometown Washington, DC and saw PULSE. I loved the magazine. I was kind of embarrassed as an African American gay man never hearing of this magazine. Can I get some back copies, if possible, and be added to the mailing list for the next issue? Several of the articles were thought-provoking and the poetry of Butta Fly Soul *(The Evil That Men Do)* was great. The fashion spread wasn't bad either. Please let me know what the subscription is and would love to contribute to the magazine or make a donation.

GREGG MIMS
Washington, DC

Write To Us!

PULSE wants to know your thoughts. Please send correspondence by e-mail to comments@pulsemag.org or by mail to PULSE Magazine c/o GMAD, Inc., 103 E. 125th Street, Suite 503, New York, NY 10035. Please include your name, address, e-mail, and phone number. Responses become the property of the magazine and, if published, may be edited for length or clarity.

HIV
I feel more in control
KALETRA tablets.
Undetectable just got easier.
• No refrigeration required†
• Can be taken with or without food
• Once or twice daily dosing††
† Exposure to high humidity outside the original container for longer than 2 weeks is not recommended.
†† In an ongoing clinical study, the once daily dose of Kaletra in combination has been evaluated at 48 weeks and is not recommended for treatment-experienced patients.[1]
Proven to keep viral loads Longterm Undetectable (LU)* and helps raise CD_4 T-cell count.**
* Kaletra in combination has been proven to keep HIV Longterm Undetectable through 204 weeks in patients new to therapy. (Undetectable = HIV RNA <50 copies/mL)[1]
**An average increase of 440 CD_4 T-cells per cubic mL of blood.[1]
Individual results may vary.

Kaletra Indication[1]

KALETRA® (lopinavir/ritonavir) is always used in combination with other anti-HIV medicines to treat people with human immunodeficiency virus (HIV) infection. KALETRA is a combination of two medicines. They are lopinavir and ritonavir. KALETRA is a type of medicine called an HIV protease (PRO-tee-ase) inhibitor. KALETRA is for adults and for children age 6 months and older.

Once daily dosing of KALETRA in combination with other anti-HIV medicines is not recommended for people with previous HIV treatment and has not been evaluated in children.

Important Safety Information[1]

KALETRA does not cure HIV infection or AIDS and does not reduce the risk of passing HIV to others.

KALETRA should not be taken if you have had an allergic reaction to KALETRA or any of its ingredients, including lopinavir or ritonavir.

Taking KALETRA with certain drugs can cause serious problems or death. KALETRA should not be taken with dihydroergotamine, ergonovine, ergotamine, and methylergonovine such as Cafergot® Migranal® D.H.E. 45® Ergotrate Maleate, and Methergine, as well as Halcion® Hismanal® Orap® Propulsid® Seldane® or Versed® KALETRA should also not be taken with rifampin, also known as Rimactane® Rifadin® Rifater® or Rifamate® Flonase® Mevacor® Zocor® or products containing St. John's wort (*Hypericum perforatum*). Once daily KALETRA should not be taken with Agenerase® Sustiva® Viracept® Viramune® Dilantin® Phenobarbital, or Tegretol® Particular caution should be used when taking Viagra® Cialis® or Levitra® since the interaction with KALETRA may result in an increase in their related side effects. Discuss all medicines, including those without a prescription and herbal products you are taking or plan to take, with your doctor or pharmacist.

Pancreatitis and liver problems, which can be fatal, have been reported in patients receiving KALETRA. Tell your doctor if you have nausea, vomiting, or abdominal pain, which may be signs of pancreatitis, or if you have or have had liver disease such as hepatitis B or C. In patients taking protease inhibitors, increased bleeding (in patients with hemophilia) and diabetes/high blood sugar have occurred. Changes in body fat have been seen in some patients receiving antiretroviral therapy. The cause and long term health effects of these conditions are not known at this time. Some patients receiving KALETRA have had large increases in triglycerides and cholesterol. Varying degrees of cross-resistance among protease inhibitors have been observed.

KALETRA® (lopinavir/ritonavir) tablets

ASK YOUR DOCTOR TODAY

The most commonly reported side effects of moderate severity are: abdominal pain, abnormal bowel movements, diarrhea, feeling weak or tired, headache, and nausea. Children taking KALETRA may sometimes get a skin rash. This is not a complete list of reported side effects.

Diarrhea may be more common in patients taking KALETRA capsules once daily compared to the twice-daily dose (57% vs. 35% of mild to severe events and possibly related to the drug; and 16% vs. 5% of at least moderate severity and possibly related to the drug as found in a clinical study).

KALETRA oral solution contains alcohol.

[1]Kaletra Prescribing Information.

Please see important patient information on adjacent page.

1-866-KALETRA (525-3872)

KALETRA.COM

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CONSUMER BRIEF SUMMARY CONSULT PACKAGE INSERT FOR FULL PRESCRIBING INFORMATION

KALETRA®

(lopinavir/ritonavir) tablets
(lopinavir/ritonavir) oral solution

ALERT: Find out about medicines that should NOT be taken with KALETRA. Please also read the section "MEDICINES YOU SHOULD NOT TAKE WITH KALETRA."

PATIENT INFORMATION

KALETRA® (kuh-LEE-tra)

Generic Name: lopinavir/ritonavir (lop-IN-uh-veer/rit-ON-uh-veer)

Read this leaflet carefully before you start taking KALETRA. Also, read it each time you get your KALETRA prescription refilled, in case something has changed. This information does not take the place of talking with your doctor when you start this medicine and at check ups. Ask your doctor if you have any questions about KALETRA.

Before taking your medicine, make sure you have received the correct medicine. Compare the name above with the name on your bottle and the appearance of your medicine with the description provided below. Contact your pharmacist immediately if you believe a dispensing error has occurred.

What is KALETRA and how does it work?

KALETRA is a combination of two medicines. They are lopinavir and ritonavir. KALETRA is a type of medicine called an HIV (human immunodeficiency virus) protease (PRO-tee-ase) inhibitor. KALETRA is always used in combination with other anti-HIV medicines to treat people with human immunodeficiency virus (HIV) infection. KALETRA is for adults and for children age 6 months and older.

HIV infection destroys CD4 (T) cells, which are important to the immune system. After a large number of T cells are destroyed, acquired immune deficiency syndrome (AIDS) develops.

KALETRA blocks HIV protease, a chemical which is needed for HIV to multiply. KALETRA reduces the amount of HIV in your blood and increases the number of T cells. Reducing the amount of HIV in the blood reduces the chance of death or infections that happen when your immune system is weak (opportunistic infections).

Does KALETRA cure HIV or AIDS?

KALETRA does not cure HIV infection or AIDS. The long-term effects of KALETRA are not known at this time. People taking KALETRA may still get opportunistic infections or other conditions that happen with HIV infection. Some of these conditions are pneumonia, herpes virus infections, and *Mycobacterium avium complex* (MAC) infections.

Does KALETRA reduce the risk of passing HIV to others?

KALETRA does not reduce the risk of passing HIV to others through sexual contact or blood contamination. Continue to practice safe sex and do not use or share dirty needles.

How should I take KALETRA?

- You should stay under a doctor's care when taking KALETRA. Do not change your treatment or stop treatment without first talking with your doctor.
- You must take KALETRA every day exactly as your doctor prescribed it. The dose of KALETRA may be different for you than for other patients. Follow the directions from your doctor, exactly as written on the label.
- Dosing in adults (including children 12 years of age and older):

The usual dose for adults is 2 tablets (400/100 mg) or 5.0 mL of the oral solution twice a day (morning and night), in combination with other anti-HIV medicines.

The doctor may prescribe KALETRA as 4 tablets or 10.0 mL of oral solution (800/200 mg) once-daily in combination with other anti-HIV medicines for some patients who have not taken anti-HIV medications in the past.

- KALETRA tablets should be swallowed whole and not chewed, broken, or crushed.
- KALETRA tablets can be taken with or without food.
- Dosing in children from 6 months to 12 years of age:

Children from 6 months to 12 years of age can also take KALETRA. The child's doctor will decide the right dose based on the child's weight.

- Take KALETRA oral solution with food to help it work better.
- Do not change your dose or stop taking KALETRA without first talking with your doctor.
- When your KALETRA supply starts to run low, get more from your doctor or pharmacy. This is very important because the amount of virus in your blood may increase if the medicine is stopped for even a short time. The virus may develop resistance to KALETRA and become harder to treat.
- Be sure to set up a schedule and follow it carefully.
- Only take medicine that has been prescribed specifically for you. Do not give KALETRA to others or take medicine prescribed for someone else.

What should I do if I miss a dose of KALETRA?

It is important that you do not miss any doses. If you miss a dose of KALETRA, take it as soon as possible and then take your next scheduled dose at its regular time. If it is almost time for your next dose, do not take the missed dose. Wait and take the next dose at the regular time. Do not double the next dose.

What happens if I take too much KALETRA?

If you suspect that you took more than the prescribed dose of this medicine, contact your local poison control center or emergency room immediately.

As with all prescription medicines, KALETRA should be kept out of the reach of young children. KALETRA liquid contains a large amount of alcohol. If a toddler or young child accidentally drinks more than the recommended dose of KALETRA, it could make him/her sick from too much alcohol. Contact your local poison control center or emergency room immediately if this happens.

Who should not take KALETRA?

Together with your doctor, you need to decide whether KALETRA is right for you.

- Do not take KALETRA if you are taking certain medicines. These could cause serious side effects that could cause death. Before you take KALETRA, you must tell your doctor about all the medicines you are taking or are planning to take. These include other prescription and non-prescription medicines and herbal supplements.

For more information about medicines you should not take with KALETRA, please read the section titled "MEDICINES YOU SHOULD NOT TAKE WITH KALETRA."

- Do not take KALETRA if you have an allergy to KALETRA or any of its ingredients, including ritonavir or lopinavir.

Can I take KALETRA with other medications?*

KALETRA may interact with other medicines, including those you take without a prescription. You must tell your doctor about all the medicines you are taking or planning to take before you take KALETRA.

MEDICINES YOU SHOULD NOT TAKE WITH KALETRA:

- Do not take the following medicines with KALETRA because they can cause serious problems or death if taken with KALETRA.
- Dihydroergotamine, ergonovine, ergotamine and methylergonovine such as Cafergot®, Migranal® D.H.E. 45®, Ergotrate Maleate, Methergine, and others
- Halcion® (triazolam)
- Hismanal® (astemizole)
- Orap® (pimozide)
- Propulsid® (cisapride)
- Seldane® (terfenadine)
- Versed® (midazolam)
- Do not take KALETRA with rifampin, also known as Rimactane®, Rifadin®, Rifater®, or Rifamate®. Rifampin may lower the amount of KALETRA in your blood and make it less effective.
- Do not take KALETRA with St. John's wort (hypericum perforatum), an herbal product sold as a dietary supplement, or products containing St. John's wort. Talk with your doctor if you are taking or planning to take St. John's wort. Taking St. John's wort may decrease KALETRA levels and lead to increased viral load and possible resistance to KALETRA or cross-resistance to other anti-HIV medicines.
- Do not take KALETRA with the cholesterol-lowering medicines Mevacor® (lovastatin) or Zocor® (simvastatin) because of possible serious reactions. There is also an increased risk of drug interactions between KALETRA and Lipitor® (atorvastatin); talk to your doctor before you take any of these cholesterol-reducing medicines with KALETRA.

Medicines that require dosage adjustments:

It is possible that your doctor may need to increase or decrease the dose of other medicines when you are also taking KALETRA. Remember to tell your doctor all medicines you are taking or plan to take.

Before you take Viagra® (sildenafil), Cialis® (tadalafil), or Levitra® (vardenafil) with KALETRA, talk to your doctor about problems these two medicines can cause when taken together. You may get increased side effects of VIAGRA, CIALIS, or LEVITRA such as low blood pressure, vision changes, and penis erection lasting more than 4 hours. If an erection lasts longer than 4 hours, get medical help right away to avoid permanent damage to your penis. Your doctor can explain these symptoms to you.

- If you are taking oral contraceptives ("the pill") or the contraceptive patch to prevent pregnancy, you should use an additional or different type of contraception since KALETRA may reduce the effectiveness of oral or patch contraceptives.
- Efavirenz (Sustiva‰), nevirapine (Viramune®), Agenerase (amprenavir) and Viracept (nelfinavir) may lower the amount of KALETRA in your blood. Your doctor may increase your dose of KALETRA if you are also taking efavirenz, nevirapine, amprenavir or nelfinavir. KALETRA should not be taken once-daily with these medicines.
- If you are taking Mycobutin® (rifabutin), your doctor will lower the dose of Mycobutin.
- **A change in therapy should be considered if you are taking KALETRA with:**
  - Phenobarbital
  - Phenytoin (Dilantin® and others)
  - Carbamazepine (Tegretol® and others)

These medicines may lower the amount of KALETRA in your blood and make it less effective. KALETRA should not be taken once-daily with these medicines.

- If you are taking or before you begin using inhaled Flonase® (fluticasone propionate) talk to your doctor about problems these two medicines may cause when taken together. Your doctor may choose not to keep you on inhaled Flonase®.
- **Other Special Considerations:**

KALETRA oral solution contains alcohol. Talk with your doctor if you are taking or planning to take metronidazole or disulfiram. Severe nausea and vomiting can occur.

- **If you are taking both didanosine (Videx®) and KALETRA:**

Didanosine (Videx®) can be taken at the same time as KALETRA tablets without food. Didanosine (Videx®) should be taken one hour before or two hours after KALETRA oral solution.

What are the possible side effects of KALETRA?

- This list of side effects is **not** complete. If you have questions about side effects, ask your doctor, nurse, or pharmacist. You should report any new or continuing symptoms to your doctor right away. Your doctor may be able to help you manage these side effects.
- The most commonly reported side effects of moderate severity that are thought to be drug related are: abdominal pain, abnormal stools (bowel movements), diarrhea, feeling weak/tired, headache, and nausea. Children taking KALETRA may sometimes get a skin rash.
- Blood tests in patients taking KALETRA may show possible liver problems. People with liver disease such as Hepatitis B and Hepatitis C who take KALETRA may have worsening liver disease. Liver problems including death have occurred in patients taking KALETRA. In studies, it is unclear if KALETRA caused these liver problems because some patients had other illnesses or were taking other medicines.
- Some patients taking KALETRA can develop serious problems with their pancreas (pancreatitis), which may cause death. You have a higher chance of having pancreatitis if you have had it before. Tell your doctor if you have nausea, vomiting, or abdominal pain. These may be signs of pancreatitis.
- Some patients have large increases in triglycerides and cholesterol. The long-term chance of getting complications such as heart attacks or stroke due to increases in triglycerides and cholesterol caused by protease inhibitors is not known at this time.
- Diabetes and high blood sugar (hyperglycemia) occur in patients taking protease inhibitors such as KALETRA. Some patients had diabetes before starting protease inhibitors, others did not. Some patients need changes in their diabetes medicine. Others needed new diabetes medicine.
- Changes in body fat have been seen in some patients taking antiretroviral therapy. These changes may include increased amount of fat in the upper back and neck ("buffalo hump"), breast, and around the trunk. Loss of fat from the legs, arms and face may also happen. The cause and long term health effects of these conditions are not known at this time.
- Some patients with hemophilia have increased bleeding with protease inhibitors.
- There have been other side effects in patients taking KALETRA. However, these side effects may have been due to other medicines that patients were taking or to the illness itself. Some of these side effects can be serious.

What should I tell my doctor before taking KALETRA?

- *If you are pregnant or planning to become pregnant:* The effects of KALETRA on pregnant women or their unborn babies are not known.
- *If you are breast-feeding:* Do not breast-feed if you are taking KALETRA. You should not breast-feed if you have HIV. If you are a woman who has or will have a baby, talk with your doctor about the best way to feed your baby. You should be aware that if your baby does not already have HIV, there is a chance that HIV can be transmitted through breast- feeding.
- *If you have liver problems:* If you have liver problems or are infected with Hepatitis B or Hepatitis C, you should tell your doctor before taking KALETRA.
- *If you have diabetes:* Some people taking protease inhibitors develop new or more serious diabetes or high blood sugar. Tell your doctor if you have diabetes or an increase in thirst or frequent urination.
- *If you have hemophilia:* Patients taking KALETRA may have increased bleeding.

How do I store KALETRA?

- Keep KALETRA and all other medicines out of the reach of children.
- KALETRA tablets should be stored at room temperature. Exposure of Kaletra tablets to high humidity outside the original container for longer than 2 weeks is not recommended.
- Refrigerated KALETRA oral solution remains stable until the expiration date printed on the label. If stored at room temperature up to 77°F (25°C), KALETRA oral solution should be used within 2 months.
- Avoid exposure to excessive heat.

Do not keep medicine that is out of date or that you no longer need. Be sure that if you throw any medicine away, it is out of the reach of children.

General advice about prescription medicines:

Talk to your doctor or other health care provider if you have any questions about this medicine or your condition. Medicines are sometimes prescribed for purposes other than those listed in a Patient Information Leaflet. If you have any concerns about this medicine, ask your doctor. Your doctor or pharmacist can give you information about this medicine that was written for health care professionals. Do not use this medicine for a condition for which it was not prescribed. Do not share this medicine with other people.

* The brands listed are trademarks of their respective owners and are not trademarks of Abbott Laboratories. The makers of these brands are not affiliated with and do not endorse Abbott Laboratories or its products.

Ref: 03-5418-R1

Revised: October, 2005

05J-036-L298-2 **MASTER**

Abbott Laboratories
North Chicago, IL 60064, U.S.A.

06A-036-N283-5
PRINTED IN U.S.A.

Quiet as it's Kept...

PULSE tastemaker's roundtable on what's in and out...

OUT: Having only Gay friends and attending only Gay events
IN: Being open to 'mixed' scenes and expanding your social circle.

OUT: Paris Hilton in jail
IN: Nicole Richie in jail

OUT: Boxy Boxer shorts
IN: Tightey Whiteys

OUT: The debacle in Iraq and Afghanistan
IN: The pogrom in Darfur and the Gaza Strip

OUT: Cruising online
IN: Cruising the streets

OUT: Isaiah Washington
IN: Isaiah Washington out of a job

OUT: Soul crooner Robin Thicke with *Lost Without You*
IN: Phine-ass R&B hunk Tank with *Please Don't Go*

OUT: Spending a 'grip' on Platinum bling at the jewelers
IN: Cheap and Chic faux gold chains from street vendors

OUT: Men who have Sex with Men (MSM)
IN: Gay Men

OUT: The *Dreamgirls* PR machinery
IN: The wait for Jennifer Hudson's CD

OUT: Naomi and her cell phone
IN: Tyra and her microphone

OUT: Loudmouth Millionaire Donald Trump
IN: Loudmouth Billionaire Mark Cuban

OUT: Halle Berry in *Catwoman*
IN: Angelina Jolie as the top choice for *Wonder Woman*.

Photo by Tarrice Love for Identities Inc.

CATALYST 4 CHANGE

A Jamaican Sistah's Dream Deferred

by Staceyann Chin

EVERY APRIL, as the leaves begin greening toward spring, as the crisp air warms toward summer, something in me stirs. After months of braving foreign winds, screaming subways, unwilling cab drivers, and the hissing heat of my Brooklyn apartment, I am ready to forget that New York City is one of the few cities I can kiss my lover full on the mouth and wish her a *Happy Pride*. By the time May arrives, I am drunk on the nostalgia of a faraway childhood spent in perpetual summertime. Then suddenly June arrives and the reason I live here becomes clear again.

For the Jamaican lesbian in cultural exile, Jamaica is a place of contradiction and beauty. That rock has given the world Marcus Garvey, Bob Marley, June Jordan, and the most controversial reggae artist and targeted homophobe, Buju Banton. Home to the modern Rastafarian movement, the ancient rebellions of the Maroons—and the most churches per square mile in the world—Jamaica spawned in me a brash spirit of survival.

Coming out as a lesbian at the University of the West Indies in Jamaica, I thought I was more than prepared for the inevitable social backlash. I know now that no one can be prepared for such brutal violence: a dozen bigoted boys; an out lesbian; in an isolated bathroom.

After that incident I knew I was not equipped to navigate the ugly side of that spirit of resistance. Lucky visa in hand, I hightailed it to New York City. I wanted to be among people who would not persecute me for something I knew was as arbitrary as the size of my shoe. I arrived in late August 1997. The fall was the most beautiful thing I had ever seen; leaves the color of blood and fire waved their welcome. Chatty Cathy that I was I shared my lesbian joy with everyone. I had visions of shouting the word "lesbian" from a skyscraper and have the entire city shout it back. And, whosoever had an ear got an earful about the grandeur of the dyke-life I was going to have in the "free world" that was the United States of America.

Most African Americans looked at me like I was a wild, mad woman. The white lesbians I met made snide comments about the African-American community. But, in the company of most White Americans I was often praised for speaking and acting so *different* from *Black Americans*. The Jamaicans, including my relatives, had given me a wide berth.

Then I wandered through the doors of *Crazy Nanny's*.

At the corner of 7th Avenue South and Leroy was a pounding teeming bar where black lesbians—of all classes and shades—gathered, and danced, and drank while telling each other that there was nothing wrong with our loving black women. On the first floor, by the bar, is where I met the woman with whom I would have my first openly lesbian relationship. Upstairs on the dance floor, I made friends with women who would later invite me to the Audre Lorde Project, the LGBT Community Center, the Nuyorican Poet's Café, and Shades of Lavender. It was at Shades of

Lavender that I learned that every June, all across the city people *celebrated* being gay. In these small political spaces, being a biracial Black immigrant lesbian was not something to mourn or cover up. All of me was cause for poetry and protest. Fist in the air and anger in my mouth, I found a place where I could articulate the pain of my self-imposed exile. It was also an opportunity for me to give voice to the silence of the racism I had experienced in the LGBT community. The following summer, I marched in every pride parade. The Pride after that, I wielded rage from microphones in Bryant Park to Prospect Park to the small Latino stroll in Queens.

"All of me was cause for poetry and protest. Fist in the air and anger in my mouth, I found a place where I could articulate the pain of my self-imposed exile. It was also an opportunity for me to give voice to the silence of the racism I had experienced in the LGBT community..."

In the belly of a brave, politically astute, and uncompromising LGBT community, I became a rebel with a clearly defined cause. In these early audiences, the plight of poor black people in America could be held in tandem with concerns about gay marriage. The same fury that spoke out against the violence against trans-people was the same fury that called for men to be held accountable for the rape of girls and women. The bodies that moved in resistance with me in the late 90s knew that oppression is an interconnected web that holds all of us in its destructive embrace. We knew that all work toward equality would hold all of the oppressed in its arms. Every moment spent in the company of those who remembered the AIDS crisis of the 80s, or Stonewall, or the Civil Rights Movement was a call to live a life of activism—and that activism was defined by work that was done to make the lives of those we represented safer, better.

Those of us who were able to march, and rage, and rebel knew we were luckier than others. We knew that our being able to speak meant we were not among the debilitated of the most severely oppressed. That my having the freedom to do this work, meant that I was no longer living in Jamaica—that we were no longer suffering in silence in Namibia or Nebraska. In East New York, we could take a short subway ride to Manhattan where we could ignore the racist experiences and march alongside white lesbians for the right to be gay. And sometimes after we worked really hard, we would drink, and dance, and plan for the next point of protest. Even in our reveling, it was always about the work.

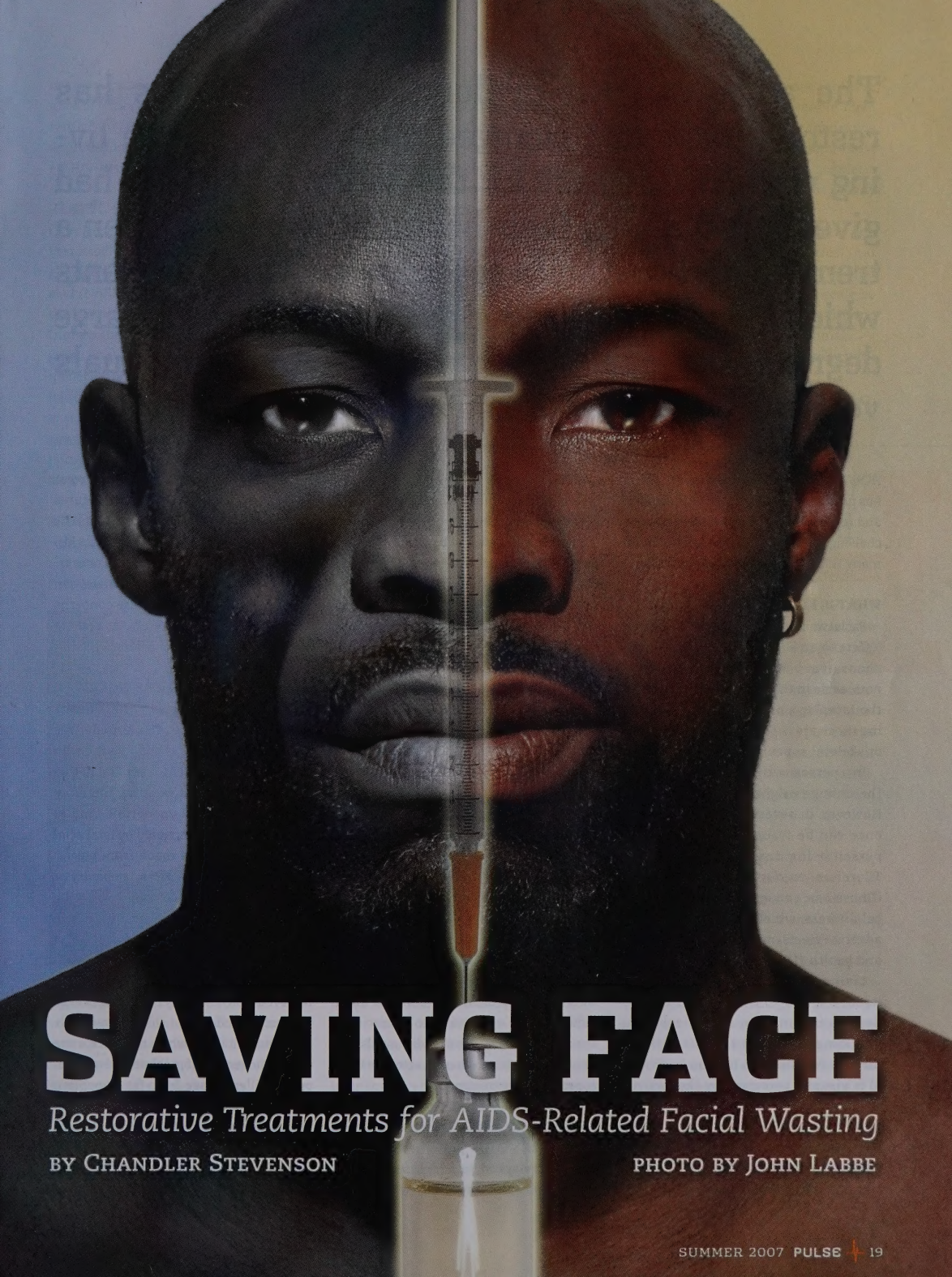
I miss the palpable activism that fueled the Pride events of the late 90s in New York City. Now, it seems that the primary purpose of most of our larger gatherings is to party. The few groups that are doing radical progressive work are forced to market activism as a fun invitation to a wild party in order to get young people to sign on. As the world outside the LGBT parameters has made space for us, so have we let go of our responsibility to the history of our resistance. We have shifted our focus away from AIDS, abortion rights, and racism. We are as taken with the frivolities of mainstream media as the least political of our era. As there emerges a thriving middle-class LGBT population, the voice of the poor in this city is muzzled. Brooklyn is rapidly becoming the new Manhattan and we simply want to push those unsightly suffering bodies toward the edge of our vision.

The dialogue about homophobia in reggae has begun to resemble that of hip hop and misogyny. So frightened are we of being tagged with derogatory labels, we begin to divorce ourselves from the communities they speak to and about. Homophobia is no more a problem that solely belongs to the Jamaican culture of reggae, than misogyny is a unique outgrowth from the culture of African-American hip hop. Homophobia exists because of a lack of comprehensive education about homosexuality. Add the drama of racism, religion, and sexism to the mix and the result is a generation that feels overwhelmed by all they must navigate to survive.

Perhaps, if I had to survive being a black lesbian in my late teens and early 20s in this political climate, I might only be able to go to work and party, and pretend that the world around me is "a-okay." The question is how do we reinvent the purposeful political progressive presence needed to push forward issues that are relevant to the *entire* LGBT community? How do we carve safe spaces for those who need it? And how do we find a voice that is nuanced and textured enough to house the diverse demographic of our growing body?

I believe we first have to admit that the needs of each sector exist and are as unique as the places from which we all spring. The body in which I cruise the world is very different from that of a white gay man in San Francisco. The history of my body is very different from that of a Puerto Rican transperson. Before the conversations about representation, and naming, and identities become one large LGBTQA (Lesbian, Gay, Bisexual, Transgender, Questioning, and Ally) soup, we need to provide room for the smaller factions to agree on the ingredients of their own conversation and concern. If every person had the space to name and safely explore all the aspects of self, the subsequent quarrels would become less about territory and more about progress.

Staceyann Chin is an out poet, political activist, and New York City resident. Keep track of her by visiting: staceyannchin.com, myspace.com/staceyannchin, or share your comments by email to: pulse@gmad.org.



SAVING FACE

Restorative Treatments for AIDS-Related Facial Wasting

BY CHANDLER STEVENSON

PHOTO BY JOHN LABBE

The advent of life-prolonging medications has restored hope and changed the lives of people living with HIV disease for the better. Many who had given up regaining their health have been a given a tremendous boost and a second wind. Minor ailments which a decade ago spelled danger, are now, to a large degree manageable, giving HIV-positive individuals very good reason to dream of a future.

HOWEVER, there is still one area that has persisted in baffling medical experts and researchers and continues to pose a challenge and threat to the quality of life of many HIV-positive people. Lipoatrophy.

WHAT IS LIPOATROPHY?

Facial wasting as it is commonly known refers to an abnormal loss of subcutaneous (just beneath the skin) fat most noticeable in the cheeks and temples of the face, legs, buttocks, and arms giving those areas a sunken and very thin or skeletal appearance.

In a person with mild facial wasting, the change might not be noticeable. However, in severe cases, the experience can be traumatic and lead to a person being discriminated against. Therefore, an outward appearance of illness can cause severe psychological distress, which could have further adverse effects on a person's well being and health.

Living with HIV is traumatic by itself, but add to it having to endure depression, anxiety, social isolation, and low self-esteem that often times directly results from how an individual is visually perceived by themselves and others. Having a change in the most noticeable feature of a person's appearance—their face—increases the urgency and desire to find an effective treatment for lipoatrophy.

CAUSE

It is still not clear why or how facial wasting occurs in HIV-positive people. Though it is believed to be a side effect of some HIV medications, especially nucleoside reverse transcriptase inhibitors (NRTIs) and protease inhibitors (PIs), it has also been seen in patients who have never been on medication. Some experts even claim that age, gender, genetic predisposition, and the length of time a person has taken antiretroviral therapy may also play a role.

TREATMENT

Research into treatment of facial wasting is improving, though there is still a long way to go in finding therapy that permanently reverses the loss of fat on the face. Fortunately, there are a number of treatment options now available. For our purpose, we will focus here on temporary facial fillers, which are injectable products that can be used to fill hollows in the face. For a long time, these treatment options were not available in the U.S. and individuals would often travel to Mexico and Europe where they were readily available. This is beginning to change, after the FDA approved some treatments.

New York City-based dermatologist N. Patrick Hennessey, M.D., who has been treating HIV/AIDS patients for many years, was asked to address any concerns that exist for people with color. He explained that often people of color when considering cosmetic procedures should be aware of conditions such as hyperpigmentation (increase in skin color) and thickening of the skin or scar-like tissue called keloids. Fortunately, in general, for most people these concerns do not have such adverse effects and are not probable with facial fillers.

HOW DO FACIAL FILLERS WORK?

Fillers involve either the dermis (middle skin layer) or the hypodermis (contains the fat cells that give the skin shape and texture). The loss of fat in this layer is what causes wasting, therefore injections into the hypodermis tend to fill the space once occupied by fat. Facial fillers can either be made from *organic* substances or made from *temporary or permanent synthetic materials.*

TYPES OF FACIAL AUGMENTATION FILLERS

Temporary fillers are broken down and removed from the body over time (weeks to months) and are considered preferable to permanent fillers which are much more difficult to remove if problems arise. Temporary fillers range from fat transplant (taking fat from part of the body and injecting it into another) to collagen to hyaluronic acid (naturally found in human connective tissue. Three brands Restylane®, Perlane®, and Hylaform® are synthetic versions of

hyaluronic acid used to change the appearance of patients with facial wasting. Currently, only Restylane® and Perlane® are approved in the U.S., and not solely used for HIV-associated facial wasting.

RESTYLANE™

In December 2003, the FDA approved Restylane™, which is a crystal-clear, biodegradable non-animal stabilized hyaluronic acid (NASHA) gel, which is injected into the dermis in tiny amounts with a very fine needle. The result is instantaneous producing a long-lasting natural enhancement that is gentle and safe to the skin. As it is free from animal substances, the risk of transmitting diseases from other species is completely eliminated. After injection, this type of filler generally remains for 6 to 12 months after the procedure.

SCULPTRA®

In August 2004, the FDA approved Sculptra® which has the distinction of being the first approved filler for HIV facial wasting. Sculptra® (poly-L lactic acid), formerly known as New-Fill, is a synthetic product used for the restoration and/or correction of the signs of facial fat loss due to HIV-related lipoatrophy. It has been evaluated for safety and effectiveness, but side effects may include the delayed appearance of small bumps under the skin in the treated area. They may with treatment disappear over time, but not always.

RADIESSE®

In December 2006, the FDA approved a new filler, Radiesse® for the treatment of HIV-related facial wasting. Radiesse® is a semi-solid gel that contains a chemical called calcium hydroxyapatite (a component of bone and teeth) and works by stimulating the production of collagen to fill in hollowed out areas of skin. Other benefits include its safety and compatibility with the body, it produces a soft and natural-looking appearance, can be performed during an office visit and last significantly longer than most other treatments.

"...an outward appearance of illness can cause severe psychological distress, which could have further adverse effects on a person's well being and health."

COST AND INSURANCE COVERAGE

For many HIV-positive people with facial wasting, the cost of treatment and the expertise required to administer them can be prohibitively expensive. Most single treatments will cost over $1000 and some will require re-treatments. Unfortunately, most private insurance companies, Medicaid, and ADAP (AIDS Drug Assistance Program) do not provide coverage for these treatments. While a few people have been able to convince their insurance carriers to pay for facial fillers, most companies classify them as cosmetic procedures rather than necessary restorative therapies.

The good news is that there is one company Dermik® Laboratories that has reimbursement allowances that are being offered on a sliding scale so that the cost of treatment to qualifying patients with Sculptra® is minimal.

Treatment of facial lipoatrophy with facial augmentation fillers would be similar to, after years of appeals and litigation, the way most insurance companies now reimburse for breast reconstruction following breast cancer surgery. However, this is the type of issue that will need people to contact their legislators as well as insurance carriers to request and/or demand that these procedures be a part of their medical benefits coverage.

With increased advocacy by patients, groups, and the medical community, it is hoped that insurance companies will eventually accept these treatments as a necessary restorative treatment for HIV-positive people with facial lipoatrophy.

As with any medical procedures, we advise that before pursuing any facial augmentation you discuss with a physician which option would be most appropriate based on your individual situation, and address any post-treatment concerns.

Many thanks to the Brooklyn, NY office of Dr. N. Patrick Hennessey, M.D. for providing some of the commonly used fillers for facial wasting photographed by Jim Carroll.

Morning After

Calvin Klein Home - Breakfast tray $125, West Elm - Bleached bamboo mat $6, Plate $10, Mono Flatware $145 (set), Calvin Klein Home - Glass bowls $30, Bookas of Sweden - Espresso & Egg cups (set) $60, MoMA - Place card holder (set) $40

"add Luxe to your Life"

BYRON BARNES, EDITOR-IN-CHIEF

Oil Reserve

Assorted Olive oils $20-$40 (olio2go.com)

Photography by **Luiz Antonio**
Stylist **Lorenzo McCain**

Get Fresh

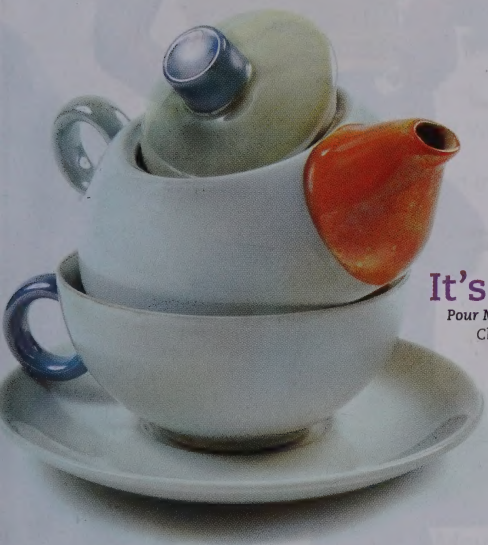
***Perlier Bagno al Mughetto** - Lily of the Valley foam bath gel 16.9 fl. oz. $15, **Marimekko**, Cotton towel $32*

It's All About Hue

Benjamin Moore *Color Preview swatches, Paint (per gallon) $45*

Something in the Air

Nectaire, *Reed diffuser $20*



It's The "T"

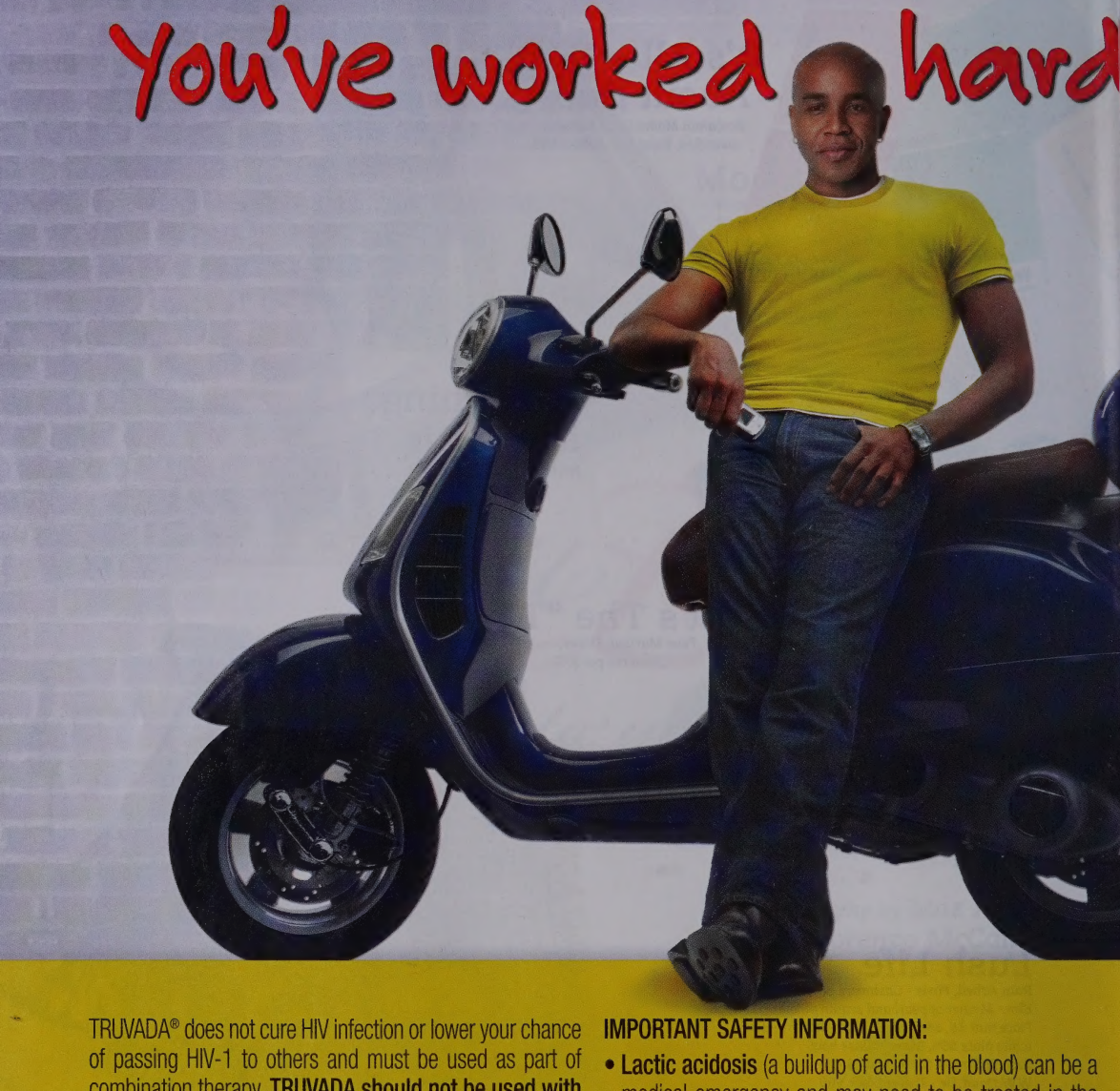
Pour Mariage Frères, *China tea pot $75*

Lush Life

Rain Arbell, Paris - *Cashmere blanket $1200,* **West Elm** - *Mother of pearl and sequin pillows $30 each, Place mat $8,* **Michael C. Fina** - *Rosenthal white plate $36,* **Marc** - *Glass bowl $25,* **Tiffany & Co.** - *Spoon $95,* **WW.Daad.De** - *Travel Clock $60*

In combination with other antiretroviral agents for the treatment of HIV-1 infection in adults

You've worked hard



TRUVADA® does not cure HIV infection or lower your chance of passing HIV-1 to others and must be used as part of combination therapy. **TRUVADA should not be used with VIREAD®, EMTRIVA®, Combivir®, Epivir®, Epivir-HBV®, Epzicom™, or Trizivir®.**

USE OF TRUVADA:

TRUVADA is indicated in combination with other antiretroviral agents (such as nonnucleoside reverse transcriptase inhibitors or protease inhibitors) for the treatment of HIV-1 infection in adults.

GILEAD

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IMPORTANT SAFETY INFORMATION:

- **Lactic acidosis** (a buildup of acid in the blood) can be a medical emergency and may need to be treated in the hospital. Call your healthcare provider right away if you have nausea, vomiting, unusual muscle pain, and/or weakness
- **Serious liver problems** (hepatotoxicity), with liver enlargement (hepatomegaly) and fat in the liver (steatosis), may occur. **Call your healthcare provider right away** if you have light colored stools, dark colored urine, and/or if your skin or the whites of your eyes turn yellow
- **Flare-ups of hepatitis B virus (HBV) infection:** If you have HIV and HBV, your liver disease may suddenly get

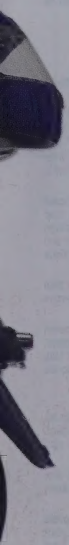
ro get where you are.

So why settle for an HIV med that's twice a day?

Once-a-day TRUVADA® can help get you to undetectable and keep you there. As part of an HIV regimen, the meds in TRUVADA:

- Can be taken with or without food
- Reduce viral load and increase CD4 cell count

Ask your doctor how TRUVADA can be part of a complete once-a-day regimen.



Truvada®

200 mg emtricitabine-tenofovir disoproxil fumarate 300 mg

Move On With Life

TRUVADA is the #1 Prescribed HIV Med*

worse if you stop taking TRUVADA. Do not stop taking TRUVADA unless directed by your healthcare provider

- **Kidney problems:** If you have had kidney problems or take other medicines that can cause kidney problems, your healthcare provider should do regular blood tests to check your kidneys
- **Bone changes:** It is not known whether long-term use of TRUVADA causes damage to your bones. If you have had bone problems in the past, talk to your healthcare provider before taking TRUVADA

Changes in body fat have been seen in some people taking anti-HIV medicines. The most common side effects of TRUVADA when taken with other anti-HIV medicines are dizziness, diarrhea, nausea, vomiting, headache, abdominal pain, depression, rash, and gas. Skin discoloration (spots and freckles) may also occur.

Discuss all medicines you take with your healthcare provider and be aware:

- Your healthcare provider may need to follow you more closely or adjust your therapy if you are taking Videx®, Videx® EC, Reyataz®, or Kaletra® with TRUVADA

For more information, please visit **www.truvada.com** or call **1-800-GILEAD-5 (1-800-445-3235)** and select option 2. **There is additional information about TRUVADA on the next page.**

*Based on data from PHAST retail monthly data; April 2006–June 2006; Wolters Kluwer Health.

Patient Information

TRUVADA® (tru-VAH-dah) Tablets

Generic name: emtricitabine and tenofovir disoproxil fumarate
(em tri SIT uh bean and te NOE' fo veer dye soe PROX il FYOU mar ate)

Read the Patient Information that comes with TRUVADA before you start taking it and each time you get a refill. There may be new information. This information does not take the place of talking to your healthcare provider about your medical condition or treatment. You should stay under a healthcare provider's care when taking TRUVADA. **Do not change or stop your medicine without first talking with your healthcare provider.** Talk to your healthcare provider or pharmacist if you have any questions about TRUVADA.

What is the most important information I should know about TRUVADA?

- **Some people who have taken medicine like TRUVADA (nucleoside analogs) have developed a serious condition called lactic acidosis** (build up of an acid in the blood). Lactic acidosis can be a medical emergency and may need to be treated in the hospital. **Call your healthcare provider right away if you get the following signs or symptoms of lactic acidosis.**
  - You feel very weak or tired.
  - You have unusual (not normal) muscle pain.
  - You have trouble breathing.
  - You have stomach pain with nausea and vomiting.
  - You feel cold, especially in your arms and legs.
  - You feel dizzy or lightheaded.
  - You have a fast or irregular heartbeat.
- **Some people who have taken medicines like TRUVADA have developed serious liver problems called hepatotoxicity,** with liver enlargement (hepatomegaly) and fat in the liver (steatosis). **Call your healthcare provider right away if you get the following signs or symptoms of liver problems.**
  - Your skin or the white part of your eyes turns yellow (jaundice).
  - Your urine turns dark.
  - Your bowel movements (stools) turn light in color.
  - You don't feel like eating food for several days or longer.
  - You feel sick to your stomach (nausea).
  - You have lower stomach area (abdominal) pain.
- **You may be more likely to get lactic acidosis or liver problems** if you are female, very overweight (obese), or have been taking nucleoside analog medicines, like TRUVADA, for a long time.
- **TRUVADA is not for the treatment of Hepatitis B Virus infection (HBV).** Patients infected with both HBV and human immunodeficiency virus (HIV) who take TRUVADA need close medical follow-up for several months after stopping treatment with TRUVADA. Follow-up includes medical exams and blood tests to check for HBV that could be getting worse. **Patients with Hepatitis B Virus infection, who take TRUVADA and then stop it, may get "flare-ups" of their hepatitis. A "flare-up" is when the disease suddenly returns in a worse way than before.**

What is TRUVADA?

TRUVADA is a type of medicine called an HIV (human immunodeficiency virus) nucleoside analog reverse transcriptase inhibitor (NRTI). TRUVADA contains 2 medicines, EMTRIVA® (emtricitabine) and VIREAD® (tenofovir disoproxil fumarate, or tenofovir DF) combined in one pill. TRUVADA is always used with other anti-HIV medicines to treat people with HIV infection. TRUVADA is for adults age 18 and older. TRUVADA has not been studied in children under age 18 or adults over age 65.

HIV infection destroys CD4 (T) cells, which are important to the immune system. The immune system helps fight infection. After a large number of T cells are destroyed, acquired immune deficiency syndrome (AIDS) develops.

TRUVADA helps block HIV reverse transcriptase, a chemical in your body (enzyme) that is needed for HIV to multiply. TRUVADA lowers the amount of HIV in the blood (viral load). TRUVADA may also help to increase the number of T cells (CD4 cells). Lowering the amount of HIV in the blood lowers the chance of death or infections that happen when your immune system is weak (opportunistic infections).

TRUVADA does not cure HIV infection or AIDS. The long-term effects of TRUVADA are not known at this time. People taking TRUVADA may still get opportunistic infections or other conditions that happen with HIV infection. Opportunistic infections are infections that develop because the immune system is weak. Some of these conditions are pneumonia, herpes virus infections, and *Mycobacterium avium complex* (MAC) infection. **It is very important that you see your healthcare provider regularly while taking TRUVADA.**

TRUVADA does not lower your chance of passing HIV to other people through sexual contact, sharing needles, or being exposed to your blood. For your health and the health of others, it is important to always practice safer sex by using a latex or polyurethane condom or other barrier to lower the chance of sexual contact with semen, vaginal secretions, or blood. Never use or share dirty needles.

Who should not take TRUVADA?

- Do not take TRUVADA if you are allergic to TRUVADA or any of its ingredients. The active ingredients of TRUVADA are emtricitabine and tenofovir DF. See the end of this leaflet for a complete list of ingredients.
- Do not take TRUVADA if you are already taking COMBIVIR®, EMTRIVA, EPIVIR®, EPIVIR-HBV®, EPZICOM™, TRIZIVIR®, or VIREAD because these medicines contain the same or similar active ingredients.

What should I tell my healthcare provider before taking TRUVADA?

Tell your healthcare provider if you:

- **are pregnant or planning to become pregnant.** We do not know if TRUVADA can harm your unborn child. You and your healthcare provider will need to decide if TRUVADA is right for you. If you use TRUVADA while you are pregnant, talk to your healthcare provider about how you can be on the TRUVADA Antiviral Pregnancy Registry.
- **are breast-feeding.** You should not breast feed if you are HIV-positive because of the chance of passing the HIV virus to your baby. Also, it is not known if TRUVADA can pass into your breast milk and if it can harm your baby. If you are a woman who has or will have a baby, talk with your healthcare provider about the best way to feed your baby.
- **have kidney problems or are undergoing kidney dialysis treatment.**
- **have bone problems.**
- **have liver problems including Hepatitis B Virus infection.**

Tell your healthcare provider about all the medicines you take, including prescription and non-prescription medicines, vitamins, and herbal supplements Especially tell your healthcare provider if you take:

- Drugs that contain didanosine (VIDEX®, VIDEX EC®). Tenofovir DF (a component of TRUVADA) may increase the amount of VIDEX in your blood. **You may need to be followed more carefully if you are taking TRUVADA and VIDEX together.**
- REYATAZ™ (atazanavir sulfate) or KALETRA® (lopinavir/ritonavir). These medicines may increase the amount of tenofovir DF (a component of TRUVADA) in your blood, which could result in more side effects. You may need to be followed more carefully if you are taking TRUVADA and REYATAZ or KALETRA together.

Keep a complete list of all the medicines that you take. Make a new list when medicines are added or stopped. Give copies of this list to all of your healthcare providers and pharmacist **every** time you visit your healthcare provider or fill a prescription.

How should I take TRUVADA?

- Take TRUVADA exactly as your healthcare provider prescribed it. Follow the directions from your healthcare provider, exactly as written on the label.
- The usual dose of TRUVADA is 1 tablet once a day. TRUVADA is always used with other anti-HIV medicines. If you have kidney problems, you may need to take TRUVADA less often.
- TRUVADA may be taken with or without a meal. Food does not affect how TRUVADA works. Take TRUVADA at the same time each day.
- If you forget to take TRUVADA, take it as soon as you remember that day. **Do not** take more than 1 dose of TRUVADA in a day. **Do not** take 2 doses at the same time. Call your healthcare provider or pharmacist if you are not sure what to do. **It is important that you do not miss any doses of TRUVADA or your anti-HIV medicines.**
- When your TRUVADA supply starts to run low, get more from your healthcare provider or pharmacy. This is very important because the amount of virus in your blood may increase if the medicine is stopped for even a short time. The virus may develop resistance to TRUVADA and become harder to treat.
- Do not change your dose or stop taking TRUVADA without first talking with your healthcare provider. Stay under a healthcare provider's care when taking TRUVADA.
- If you take too much TRUVADA, call your local poison control center or emergency room right away.

What should I avoid while taking TRUVADA?

- **Do not breast-feed.** See "What should I tell my healthcare provider before taking TRUVADA?"
- **Avoid doing things that can spread HIV infection** since TRUVADA does not stop you from passing the HIV infection to others.
  - **Do not share needles or other injection equipment.**
  - **Do not share personal items that can have blood or body fluids on them, like toothbrushes or razor blades.**
  - **Do not have any kind of sex without protection.** Always practice safer sex by using a latex or polyurethane condom or other barrier to reduce the chance of sexual contact with semen, vaginal secretions, or blood.
- COMBIVIR, EMTRIVA, EPIVIR, EPIVIR-HBV, EPZICOM, TRIZIVIR, or VIREAD. **TRUVADA should not be used with these medicines.**

What are the possible side effects of TRUVADA?

TRUVADA may cause the following serious side effects (see "What is the most important information I should know about TRUVADA?"):

- **Lactic acidosis** (buildup of an acid in the blood). Lactic acidosis can be a medical emergency and may need to be treated in the hospital. **Call your doctor right away if you get signs of lactic acidosis.** (See "What is the most important information I should know about TRUVADA?")
- **Serious liver problems (hepatotoxicity),** with liver enlargement (hepatomegaly) and fat in the liver (steatosis). Call your healthcare provider right away if you get any signs of liver problems. (See "What is the most important information I should know about TRUVADA?")
- **"Flare-ups" of Hepatitis B Virus infection,** in which the disease suddenly returns in a worse way than before, can occur if you stop taking TRUVADA. Your healthcare provider will monitor your condition for several months after stopping TRUVADA if you have both HIV and HBV infection. TRUVADA is not for the treatment of Hepatitis B Virus infection.
- **Kidney problems** If you have had kidney problems in the past or take other medicines that can cause kidney problems, your healthcare provider should do regular blood tests to check your kidneys.
- **Changes in bone mineral density (thinning bones)** It is not known whether long-term use of TRUVADA will cause damage to your bones. If you have had bone problems in the past, your healthcare provider may need to do tests to check your bone mineral density or may prescribe medicines to help your bone mineral density.

Other side effects with TRUVADA when used with other anti-HIV medicines include:

- Changes in body fat have been seen in some patients taking TRUVADA and other anti-HIV medicines. These changes may include increased amount of fat in the upper back and neck ("buffalo hump"), breast, and around the main part of your body (trunk). Loss of fat from the legs, arms and face may also happen. The cause and long term health effect of these conditions are not known at this time.

The most common side effects of EMTRIVA or VIREAD when used with other anti-HIV medicines are: dizziness, diarrhea, nausea, vomiting, headache, rash, and gas. Skin discoloration (small spots or freckles) may also happen with TRUVADA.

These are not all the side effects of TRUVADA. This list of side effects with TRUVADA is **not complete** at this time because TRUVADA is still being studied. If you have questions about side effects, ask your healthcare provider. Report any new or continuing symptoms to your healthcare provider right away. Your healthcare provider may be able to help you manage these side effects.

How do I store TRUVADA?

- **Keep TRUVADA and all other medicines out of reach of children.**
- Store TRUVADA at room temperature 77 °F (25 °C).
- Keep TRUVADA in its original container and keep the container tightly closed.
- Do not keep medicine that is out of date or that you no longer need. If you throw any medicines away make sure that children will not find them.

General information about TRUVADA:

Medicines are sometimes prescribed for conditions that are not mentioned in patient information leaflets. Do not use TRUVADA for a condition for which it was not prescribed. Do not give TRUVADA to other people, even if they have the same symptoms you have. It may harm them.

This leaflet summarizes the most important information about TRUVADA. If you would like more information, talk with your healthcare provider. You can ask your healthcare provider or pharmacist for information about TRUVADA that is written for health professionals. For more information, you may also call 1-800-GILEAD-5 or access the TRUVADA website at www.TRUVADA.com.

Do not use TRUVADA if seal over bottle opening is broken or missing.

What are the ingredients of TRUVADA?

Active Ingredients: emtricitabine and tenofovir disoproxil fumarate

Inactive Ingredients: Croscarmellose sodium, lactose monohydrate, magnesium stearate, microcrystalline cellulose, and pregelatinized starch (gluten free). The tablets are coated with Opadry II Blue Y-30-10701 containing FD&C Blue #2 aluminum lake, hydroxypropyl methylcellulose 2910, lactose monohydrate, titanium dioxide, and triacetin.

℞ Only

March 2006

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GILEAD

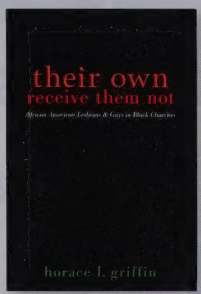
BOOKMARK

*Writer **Justin Hall**, shares his latest picks that peeked our interests. Get your read on!*

Their Own Receive Them Not: *African American Lesbians & Gays in Black Churches*

BY HORACE L. GRIFFIN / *Pilgrim Press*, $24.00

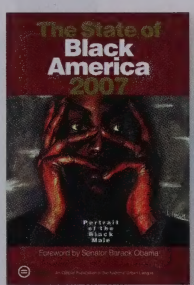
Rev. Horace L. Griffin is black, gay, and grew up in a Missionary Baptist church. Based on his life and church experience, he has witnessed how "black church leaders and congregants have been resistant in, and even closed to, treating gay and heterosexual congregants equally or, in many cases, simply offering compassion to gay people. In his 240-page book, Griffin, an Episcopal priest, attempts to deconstruct the history and legacy of homophobia in the black church using sociological, theological, and biblical lenses. "The black church's teaching that homosexuality is immoral has created a crisis for lesbian and gay Christians in black churches," he writes in his new book.



The State of Black America 2007: *Portrait of the Black Male*

BY NATIONAL URBAN LEAGUE, SENATOR BARACK OBAMA (FOREWORD), STEPHANIE J. JONES (EDITOR) / *Beckham Publications Group*, $14.95

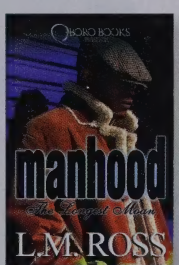
According to the 2007 National Urban League Equality Index, glaring gaps continue to exist between black and white Americans—with a disproportionate impact on black males. In this compilation of essays, some of America's finest minds analyze the causes and effects of these disparities and present targeted recommendations for eliminating them. In the end, readers will understand why, in the words of National Urban League President Marc H. Morial, "Empowering black males to reach their full potential is the most serious economic and civil rights challenge we face today."



Manhood: *The Longest Moan*

BY L.M. ROSS / QBORO/URBAN BOOKS, $14.95

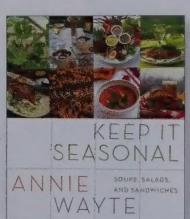
This is a tale of youthful ambition, four cats on a mission to be nothing less than stars. Ty is a writer who pines for love. David is a dancer who burns with lust. Browny is a singer who yearns for the kiss of celebrity. Face is an actor whose role it is to emote the biggest of lies. Together, in the mean and rhythmic streets of New York City, they seek their fame, fortune, and prize. Some want to know of love's ultimate sigh, and some find the rainbow. All find unexpected surprises in a story about dreams, lust, and the meaning of friendship, the test of disease, and the definition of trust.



Keep It Seasonal: *Soups, Salads, and Sandwiches*

BY ANNIE WAYTE / *Morrow Cookbooks*, $29.95

In Keep It Seasonal, acclaimed chef Annie Wayte shows cooks that ingredients that are truly fresh, local, and in season are better tasting and better for you. Think of a fresh, crisp fall apple, a tender spring artichoke, or a juicy summer peach. They're at their peak in flavor and nutrition, and are a lot more affordable than the trucked-in, out-of-season variety. Annie introduces a world of local butchers, bakers, greengrocers, and farmers who are producing fresh, flavorful food. And that kind of quality is always in season.

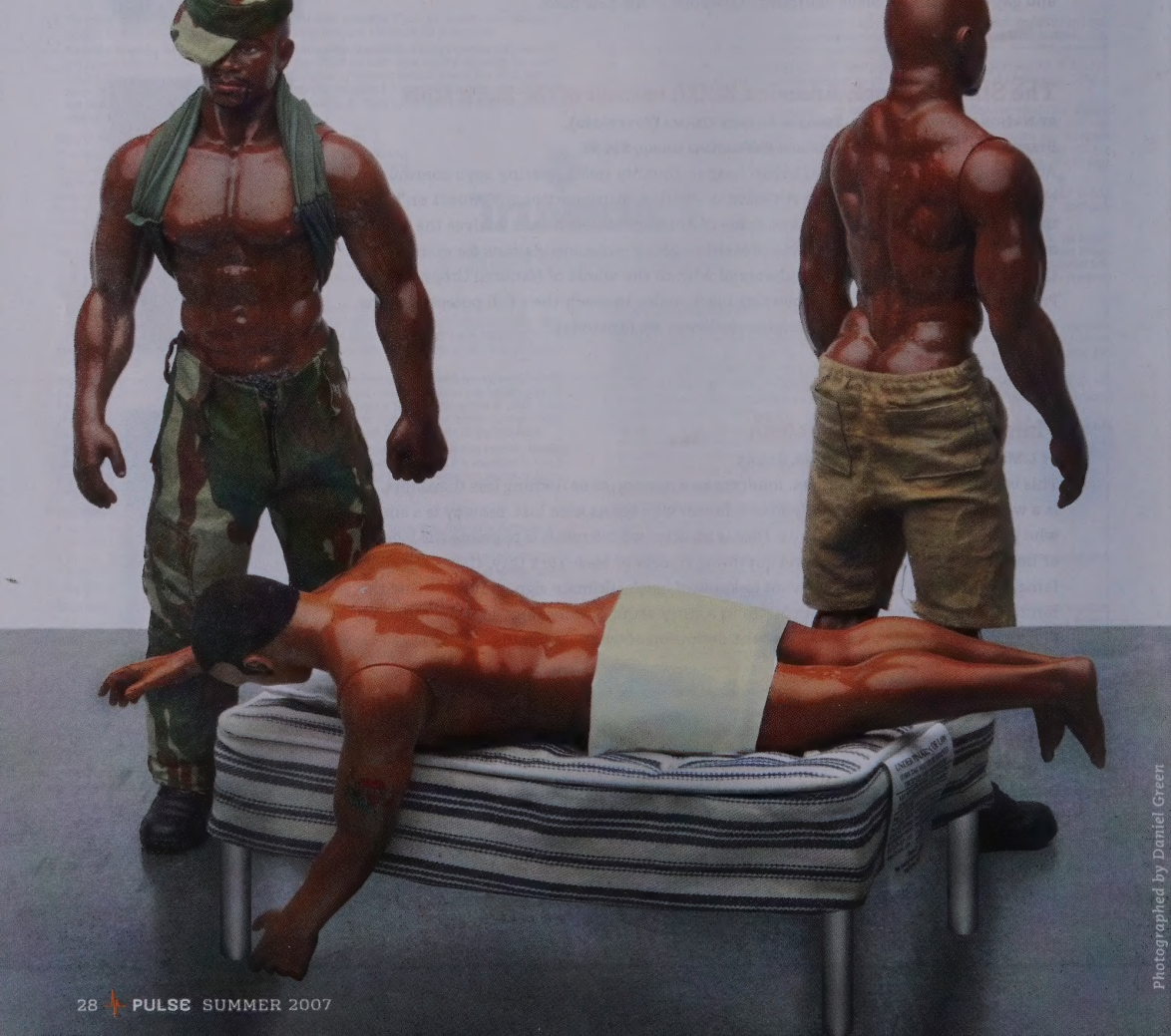


GAY BARS

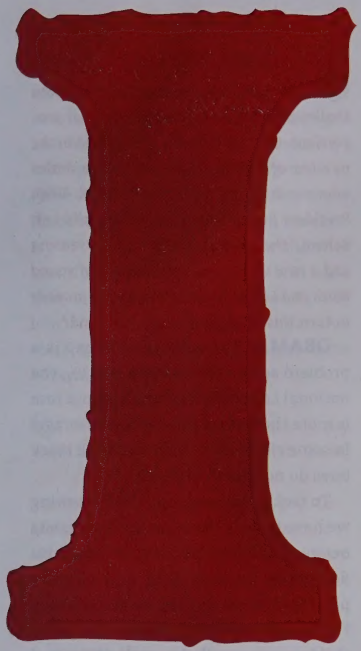
EX-INMATES TALK ABOUT LIFE ON LOCKDOWN

A SPECIAL REPORT

BY L. MICHAEL GIPSON



Photographed by Daniel Green



"In prison you are told when to eat, sleep, and wash your butt. You're surrounded by criminals who will test you, try to fight and steal from you among other things." said Rico, 32, a former black gay inmate.

There are an estimated 2.3 million Americans incarcerated in America's prisons, the majority of whom are Black. It is safe to deduce that a disproportionately high number of gay men of color are likely to reside in these prisons at some point in their lives. Statistics like these and frequent news reports about wrongly convicted persons are causing some black men to ask questions about prison life. To get a handle on these questions, PULSE reviewed several advocacy reports, court cases, the Prison Rape Elimination Act of 2003 (PREA), PREA data on sexual assault, and interviewed three formerly incarcerated black gay men. Two of the men, both of whom served multiple sentences, agreed to be quoted, and the third provided content about prison survival for this perspective.

"I was very scared the first time," said Keith Williams, 44, a former inmate who between 1984 and 2000 served eight sentences for forgery and grand theft in Ohio and Alabama. Attractive, over six feet, and battling an addiction, Keith managed to survive prison, partially, because of who he was, who he knew, and how he handled himself.

One's survival can depend on where you are and with whom you are incarcerated, and being in your home state or among people you knew on the "outside" can, ultimately, alter your experience. But, for Rico, seeing familiar faces from the outside was no guarantee. According to him, "Knowing people didn't protect me. It just gave me a heads up on what was going on and which individuals not to mess with or groups to hang with." While all men interviewed advocated sticking to yourself, keeping your social circle small, and minimizing trust, these strategies are bet hedgers at best.

Historically, with prison administrators' propensity to give openly gay men gatekeeper positions (based on antiquated notions of temperament), it was once said that gays "ran the prisons." However; in 1993, researcher Stephen Donaldson noted that "homophobia in prisons had risen and the status of queens had fallen...." In most states, genitalia-based classification is how transgender inmates are designated prisons and quarters. Therefore, a pre-op transgender who has breast implants and undergone hormone therapy is often times assigned to the general population. Such assignments usually engender multiple opportunities for rape, harassment, coerced sex, and forced prostitution.

More oppressive prisons, not upholding prisoner's rights, tend to have higher incidents of rape, beatings, and inmate murder. According to Keith, "Being a black gay man in Alabama, you were more discriminated against than in Ohio. You were more watched, limited in what you could do, and the places you could go." Regardless of education, "...you had to bust rock down to gravel." Schooling had an advantage, though. "In Ohio, if they realized you could be an asset and do their work they used you...." Keith stated.

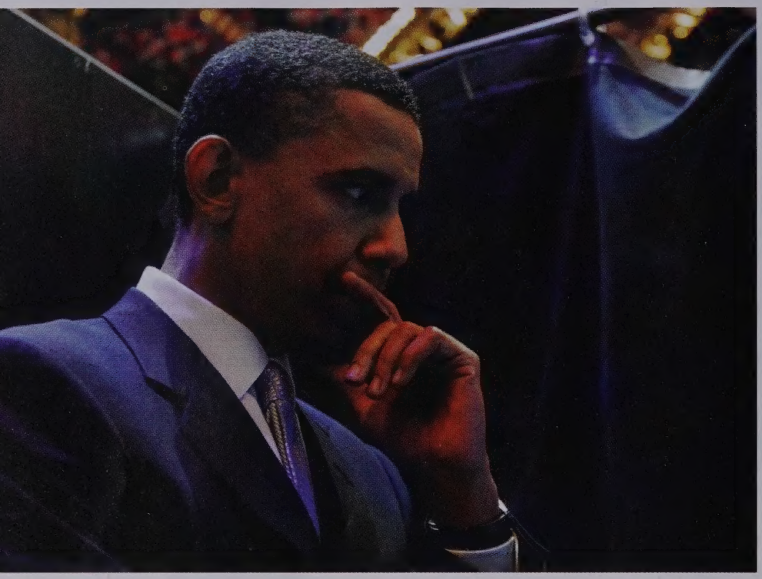
In unruly prison dorms, comparing the HBO series, Rico says "People sneak drugs, men have sex with men, people get stabbed, jumped, cut; they are always fighting just like in the TV show Oz." However, perpetrators of rape and sexual assault aren't always other inmates. According to 2005 PREA statistics, of all reported sexual misconduct allegations, 38% involved prison staff. In California's Corcoran correctional facility, several guards were charged with setting up inmate rapes for Warren "Booty Bandit" Robinson, a prisoner known to beat and forcibly sodomize other prisoners for extra food and tennis shoes.

Prison rape is less about attraction and sexual release, and more about asserting power and dominance. Consequently, small, young, and more effeminate guys are more likely to be targeted as are older, unattractive, and big men. In order not to be victimized, a new inmate must leave no doubt about his willingness to defend his manhood. At only 5'8", handsome with a butterscotch complexion, Rico states that he didn't get raped.

"SOME GAY MEN LOOK FOR AND WELCOME SEX WITH OTHER INMATES, SOMETIMES OUT OF DESIRE, BUT ALSO AS A STRATEGY FOR AVOIDING VICTIMIZATION OR TO GUARANTEE PROTECTION."

According to the Human Rights Watch, Rico's experience isn't the rule. Many victims are repeatedly harassed, verbally assaulted, and raped five to six times. Victims would vehemently fight attackers before tiring of the battle, eventually, succumbing to being "turned out." Once having surrendered, the victim is labeled as a "homo" or "punk" to be taken advantage of, and, theoretically, an assumed homosexual latency is revealed.

Admittedly, all sex in prison isn't rape. Some gay men look for and welcome sex with other inmates, sometimes out of desire, but also as a *(cont'd on page 94)*



The Road Less Traveled.

★★★★★★★★★★★★★★★★★★★★★★★★★

Barack Obama makes serious bid for The White House.

★★★★★★★★★★★★★★★★★★★★★★★★★

A PULSE Exclusive Interview
by Tokes M. Osubu and Robert E. Crawford

***Q:** In Europe, gays in the military are not a problem but are still banned from serving openly in the U.S. military. How do you plan to eliminate discrimination based on sexual orientation against individuals who are willing and capable candidates to serve their country?*

OBAMA: I fully support the repeal of the "Don't Ask, Don't Tell" policy. The key test for military service should be patriotism, a sense of duty, and a willingness to serve. We also have evidence that "Don't Ask, Don't Tell" is not working. A 2005 GAO report found that the policy has resulted in a significant loss of service members in critical occupations and with important language skills like Arabic and Korean. Former Chairman of the Joint Chiefs of Staff General John Shalikashvili said times have changed and that, "I now believe that if gay men and lesbians served openly in the United States military, they would not undermine the efficacy of the armed forces." These assessments confirm what military leaders in other parts of the world, including Europe, have found.

***Q:** Nationally, our inner cities are facing challenges that have reached abysmal proportions. One challenge is represented in the number of young Black and Latino males who are dropping out of high school. With President Bush's initiative of "No Child Left Behind," the dropout rates are still increasing and a new underclass is developing of young Black and Latino males. How do you propose to turn this crisis in education around?*

OBAMA: The achievement gap is a problem across the country. At 21%, the national Latino high school dropout rate is more than twice the national average. In some cities, more than half of all black boys do not finish high school.

To tackle this problem, the first thing we have to do is close the gap that exists between children before they enter kindergarten by providing high-quality preschool opportunities to all children. Far too few Latino and African-American children are enrolled in early childhood education programs, despite the proven successes of such programs. As president, I will increase funding for Head Start and Early Head Start and expand access to Pre-K.

Another step toward closing this gap is to attract talented teachers to our inner cities and other high-needs areas. We know that low-income and minority students are disproportionately taught by teachers who have less experience than teachers in other schools. My plan to attract and retain high-quality teachers in high-needs districts will go a long way toward closing this gap. I introduced the Teaching Residency Act, which recently passed the Senate Health, Education, Labor, and Pensions Committee. My bill will provide grant funding for prospective teachers to serve residencies with school districts similar to other professional fields like medicine, provide stipends for teachers-in-training in exchange for a commitment to continue teaching in that school once they are finished with their program, and provide much-needed funding for specialized training of new teachers in high-needs districts.

To further reduce the drop-out rate and close the achievement gap, it is also important to make sure that we provide

after-school programs and summer learning opportunities to disadvantaged and minority students. As president, I will ensure that we continue to work to close the achievement gap during those months when school is not in session. My "STEP UP" plan supports summer learning opportunities, with curricula that emphasize mathematics and problem solving, by offering competitive state grants to support summer term education programs.

Q: ***The level of homelessness among gay youth across the country is at crisis levels, due in part to sexual abuse and violence against teens suspected of being gay. Consequently, we are seeing a generation of kids who are spending their formative years living on the streets, without the support of family or community. What would an Obama Presidency do to reverse this?***

OBAMA: Recent estimates show that while gay men and lesbians make up 3-5% of the general population, they account for more than 20% of homeless youths under age 21 in many urban areas. Many of these youth have attempted suicide. We know that these young men and women face tremendous difficulties growing up including rejection from families, harassment, violence from peers, rejection by adults, HIV risks, and substance abuse.

I believe we have to do more to ensure that we have adequate resources and support structures to nourish and encourage gay and lesbian youth, as well as all young people. Despite the prevalence of homelessness among all youth in this country, we've witnessed cuts in funding for the Runaway and Homeless Youth Act over the last few years. And funding for the Community Development Block Grant program has declined 15% since fiscal year 2001—funds that can be used, among other things, to support homeless shelters. As president, I will fund these programs and ensure that we have adequate funding and support for homeless youth.

Additionally, I will work to strengthen our law enforcement efforts so that gay and lesbian youth do not find themselves victims of sexual and violent crimes. In 2004, crimes against LGBT Americans constituted the third-highest category of hate crime reported and made up more than 15% of such crimes. I am an original co-sponsor of federal legislation that adds sexual orientation, gender, gender identity, and disability to existing federal law that gives authority to the federal government to investigate and prosecute violent crimes. As a state senator, I passed tough legislation that made hate crimes and conspiracy to commit them against the law.

Q: ***The Healthcare system is homophobic against gay persons and it has come to a point where treatments, doctor's visits, and medications are not affordable by persons who have HIV/AIDS. How do you plan to address this issue?***

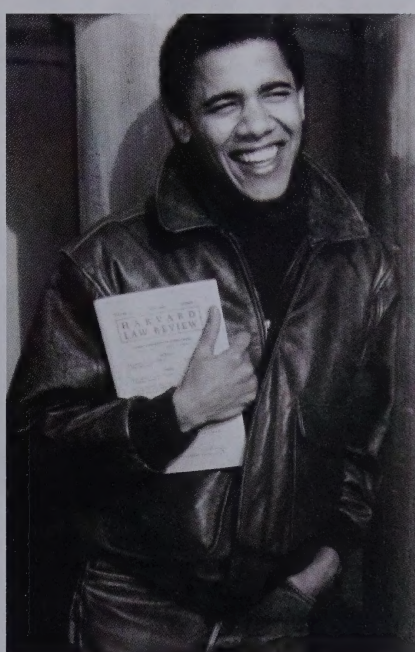
OBAMA: The Ryan White Care Act (RWCA) provides access to life-saving treatment and care for over half a million low-income Americans with HIV/AIDS. We must continue to fund this vital program. Throughout the reauthorization process for RWCA, I worked closely with RWCA service providers, the Chicago Department of Public Health, and the Illinois Department of Public Health to analyze and find ways to improve the program for Illinois and for the nation. I will continue to fight to ensure that life-saving medications and treatments are affordable to patients with HIV/AIDS.

In this campaign, I have also proposed a universal healthcare plan that would make health insurance affordable for all Americans. I will create a new national health program that will allow individuals and small businesses to buy affordable healthcare similar to that available to federal employees. No one will be turned away or charged more due to illness, and everyone who needs it will receive a subsidy for their premiums. I will also create a National Health Insurance Exchange to reform the private insurance market. Any American could enroll in participating private plans, which would have to provide comprehensive benefits, issue every applicant a policy, and charge fair and stable premiums. Thus, under my plan, insurers will no longer be able to "cherry pick" which services/treatments to cover or to discriminate against certain pre-existing treatments.

Q: ***Lately, there have been calls for the elimination of the N and B words, especially in music and in the media. The "F" word (faggot or fag) is just as derogatory and offensive, but no one is calling for its elimination. What is your position on this double standard and on what it says about how gays and lesbians are perceived?***

OBAMA: I find the "F word" just as reprehensible as the "N and B words"—it too has no place in a tolerant America. We have witnessed a coarsening of our culture that we all have to think about. The entertainment industry has played some role in this, but in many ways we have to accept personal responsibility and begin to condemn discriminatory and derogatory insults, wherever they may arise.

Tokes M. Osubu is the Executive Director of Gay Men of African Descent. Robert E. Crawford is the Associate Publisher for PULSE Magazine.



Signature WATER

by Zulekha Haywood

Summer heat brings people outdoors in droves for festivals, carnivals, and coastal retreats. The rising mercury amps up the body's natural thirst for a cool beverage, but before you sip another mojito, consider this: Over half of your body's composition is made of water (not tequila!), and your body needs about 64 ounces per day to function properly and flush out toxins. Furthermore, hydrated skin has a naturally luscious glow that can't be duplicated with any amount of bronzer. So, whether breaking a sweat at a free concert or soaking up sun poolside, take a breather from endless icy-cold alcoholic and caffeinated concoctions. Keep it simple with a bottle of water. Now, that's a cold one bursting with rewards!

FIJI®
Natural artesian still water
(Fiji Islands, since 1996), 1 L. $2.69.
FIJIWATER.COM

GLACÉAU VITAMINWATER®
Nutrient-enhanced flavored water
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VOSS®
Natural artesian still water
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Seltzer, carbonated water
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Corey, Identities Inc. photographed by **Tarrice Love**
Waters photographed by **Luiz Antonio**
Styled by **Llewellyn Jenkins**
Grooming by **Douglas Snuggs**

GAYBONICS

BY TERENCE TAITT *Back in the day there was a time, before thug realness, gangsta rap, online dating, and top/bottom issues, when men just met at a bar or club, went home, and "worked IT out!" The lifestyle was considered a subversive way to live, so a vernacular developed over the years equally subversive and often quite difficult to decipher. Gay men became savvier in their ways of communicating with each other, to where an outsider or novice was unable to follow a conversation in Gaybonics.*

This gay form of street jargon took on a life all its own. Questions asked such as "You got trade?" "Do you date bangees?" "Want one of my party vitamins?" and the like determined compatibility—a verbal gaydar, if you will. Throughout the years, there has been an underground language amongst the gay Blatino community, a 'gay-ebonics' (gb), that is so diverse from different regions that our PULSE editors decided to share this with our readers. Here are just a few commonly used terms—some old, others new. Please feel free to add your own to our dictionary.

ALICE *(n-gb)*: Government official who keeps order, safety, and enforces the law; the police. *(syn-gb)*: Mag, PoPo, Judy Justice, Hamburger, Five-O.

BANGEE *(adj-gb)*: Term used to describe anyone or anything with an inner-city appearance or disposition; ghetto.

BUTCH QUEEN *(n-gb)*: Any gay man with a hyper-masculine appearance.

CARTA *(n-gb)*: The front part of the head; the face; e.g., "that boy is fine, he has major carta." *(syn-gb)*: structure.

COINS *(n-gb)*: A term used for currency, money, or deep pockets. *(syn-gb)*: ducats, pearls, chips, lire. Also, coinage.

CRAFT *(n-gb)*: Any form of stealing or misappropriation of merchandise without right or permission. See also: mop *(syn-gb)*: clean, mopping.

DOO LA LA *(adj-gb)*: A term used to describe what a person is wearing, a fashionable outfit *(syn-gb)*: labels, pieces, drag, closet.

FEM QUEEN *(n-gb)*: Any gay man with feminine appearance or demeanor.

GAG *(v-gb)*: To be at a loss for words or to be rendered speechless; e.g., "They gagged when they saw my outfit."

GILDA *(n-gb)*: A wig, usually an obvious one.

JUDY *(n-gb)*: A term given to a good female friend *(syn-gb)*: sister, daughter, good girlfriend (GGF).

KEE-KEE *(v-gb)*: To find amusement in something to the point of uproarious laughter; joking around with friends.

LEGENDARY *(adj-gb)*: To be iconic and instantly recognizable on the Ball scene.

MASH *(v-gb)*: To have sex. *(syn-gb)*: knock-down, session, service, swirl.

(THE) MONSTER *(n-gb)*: A derogatory term referring to the HIV virus. *(syn-gb)*: the package, the service, the giggles, Agnes.

PARTY 'N' PLAY (PNP) *(n-gb)*: use of crystal methamphetamine as part of sexual encounter(s).

PEED *(v-gb)*: To outdo oneself; excel at something while leaving others way behind you.

READ *(v-gb)*: To be told about yourself; also to lose in an argument; e.g., "My boss got on my nerves, I had to read him."

SEED *(adj-gb)*: A low form of anything, esp. pertaining to sex, but may also be used to describe the cheapness of one's appearance; e.g., "Yeah, I saw her last night. Her gilda was Seed."

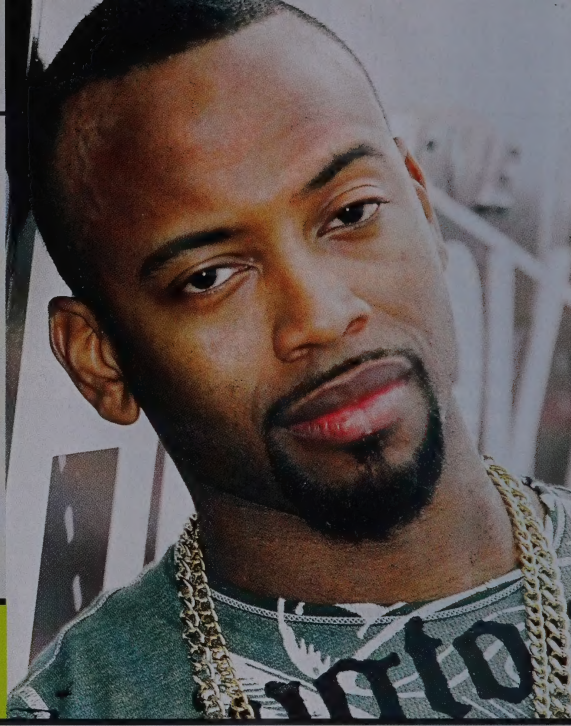
SERVE *(v-gb)*: A ballroom term for exciting a crowd the crowd or those around you. One can also be Served *(v-gb)*: meaning you were 'one-upped' or taken advantage of.

SHADE *(n-gb)*: Any form of negativity with regard to communication or action; e.g., "I spoke to him, but he didn't speak back; she was throwing shade."

TRADE *(n-gb)*: 1. A man who has sex with men for pay. 2. An expression denoting the male genitalia, usually large; e.g., "My date last night had traaaaade!" *(syn-gb)*: piece, wood, meat, pipe, bam bam ma wango.

TRANNIE *(n-gb)*: Usually refers to a transsexual, but also used to refer to transvestites.

VOGUE *(v-gb)*: A form of dance, developed by Black and Latin men in NYC, often competitive; involves exaggerated poses (old way) and dramatic falls (new way).



TONÈX
Stereotype: Steel and Velvet
Nureau Ink/Zomba

●●●●◖ **Pulse Pts**

Tonèx is the sangingest man in the industry. Now, with *Stereotype: Steel and Velvet*, he offers 2-discs of gospel/rock/R&B/hip-hop bangers; party tunes (*steel*) and melodic soulful and jazz-influenced ballads (*velvet*). The gospel/soul force of nature flexes his full range! His amazing tenor, which soars and runs like no other, holds it all together!

Non-Stop Pop
by Kevin E. Taylor

JILL SCOTT
The Real Thing
Hidden Beach

●●● **Pulse Pts**

Jill Scott's newest release, *The Real Thing*, and its soulfunky first single "Hate On Me" returns Jill to the sassy, soul sistahtude that originally made us take notice. On The Real Thing, she's forceful, poetic, and independent, celebrating her man and love!

BJ CROSBY
Best Of Your Heart
Crosell

●●●◖ **Pulse Pts**

Every diva is doing standards (Natalie Cole, Deniece Williams, and Vanessa Williams, et al.), but none of them have the bawdy, ballsy vocals of Broadway diva BJ Crosby. From Stevie Wonder to Betty Carter, with some originals thrown in for balance, BJ sounds better than ever!

KEITE YOUNG
The Rise and Fall of Keite Young
Hidden Beach

●●● **Pulse Pts**

An original member of Kirk Franklin's group The Family, Keite Young with his debut CD *The Rise and Fall of...* has branched OUT! "If We Were Alone" (with N'Dambi) and "U Got It" are soulful-sexy; and the conflicted-but-not-really "Alright" ventures into Marvin Gaye/Prince territory (sensual/spiritual soul music). Keite emerges as One To Watch!

Kevin E. Taylor, is the author of JADED and a media producer for BET J. KevinETaylor.com

Also PULSING...
NEW MUSIC from Sunny Hawkins "More of You" (married into the Hawkins Family a la Vickie Winans), and professor Dr. Cornel West expanding minds with a hip-hop groove on "Never Forget: A Journey Of Revelations."

Starstruck

RIHANNA

good girl gone bad

by Kevin E. Taylor

WHEN SHE SASHAYED onto the music scene, Rihanna aka Little Miss *Pon De Replay*, was cute, demure, and not expected to last. Maybe even achieve one-hit wonder status. Her sophomore CD virtually got igged by black radio, but then something wonderful happened. This pretty sexy dancehall girl became a pop sensation. With her single *S.O.S.* featured in the huge "Nike Rockstar Workout" campaign, Rihanna had a second chance, and with *Unfaithful*, proved that "good girls screw up, too." Now, with *Good Girl Gone Bad* and her sizzling banger *Umbrella*, along with plenty of buzz that keeps her name among the likes of Beyonce and Jay-Z, Rihanna's success proves that artist development is alive and well in the music biz! She's grown up and out, and into herself, giving naughty girls hope that BAD CAN BE GOOD ...and sometimes HOT!

The R Word

RUSSELL STEPS UP!

OUR EDITORS were in hot pursuit of hip-hop entrepreneur and fashion mogul Russell Simmons for answers to PULSE's questions about the release of his new book Do You!, its impact on the gay community, and topics concerning his declaration of being a "gay activist" who's not gay. A **PULSE Exclusive** *Interview by* **David P. Martin, Fred Brown, Jr. and Robert E. Crawford.**

Q: ***The title of your book is Do You! Where did you get the idea for the title? What does Do You! exactly mean and what do you want to convey to your reader?***

SIMMONS: The name of the book was originally Russell Simmons' Hip-Hop Laws of Success. Then I sent a copy of the galleys to Oprah Winfrey, who thought that the title was "corny," and suggested that I name it after the second chapter, which was Do You! At first my publisher didn't want to change the title, since he had already started printing up covers, but in the end, we decided to go with Oprah's recommendation. And I think it was the right decision.

Essentially, Do You! means always try to listen to what your heart tells you is right, instead of what the world might tell you to do.

Q: ***How do the 12 Laws to Access the Power in You to Achieve Happiness and Success hold up universally and cross-culturally given that each individual's life experiences vastly differ?***

SIMMONS: Our experiences may differ vastly, but at the end of the day, I think we're all much more alike than we are different. My favorite quote in the book comes from the Buddhist monk Thich Nhat Hanh, who said, "We are here to awaken from the illusion of our separateness." That's really such an important thing to remember, that we're all connected. I think we all have that little voice of God inside of us, and when we take the time to listen to it; we can hear that we're all the same. I believe that's why hip-hop has had such a profound affect on this country, because it's created a common ground for the kids in Compton and the kids in Beverly Hills. So I'm hoping that Do You! can take that common ground and build on it.

Q: ***Why was Donald Trump selected to write the introduction to your book?***

SIMMONS: Donald's a good friend of mine who's inspired many people with his successes. Of course, Donald's definition of success might not be as spiritually based as my own, but I'm always amazed by his passion and his dedication to his vision. And since those are central themes to the book, I thought he was a good choice to write the intro.

Q: ***Your commitment to hip-hop and rap music has put you in the spotlight as a spokesperson for issues surrounding racial epithets, as in the case between broadcaster Don Imus and the Rutgers women's basketball team. This incident has impacted more than just the entities directly involved. Is there a Do You! solution that could have prevented the negative experience for the Rutgers women's team and the domino effect seen on the country at-large?***

SIMMONS: I think the message in Do You! that is most appropriate to the Imus situation is always believing in the power of dialogue. Throughout my career, I've always tried to promote dialogue, no matter what was being debated and no matter who was doing the talking. In the book, I write, "In the absence of dialogue, people tend to stand in their separate corners and build walls based on their perceptions of differences. But once the conversation starts, then those walls fall down. And once those walls fall down, then we're free to build something meaningful and lasting."

So while I realize that situation was very hurtful to all those involved, I have to believe that it was ultimately a helpful dialogue for the country. Because at least it created a conversation about the pain black women in specific, and many women in general, feel when they hear words like "ho" on the airwaves. I'm sorry that the Rutgers team had to experience that initial negativity, but hopefully the dialogue it led to will help prevent similar words being used to describe another group of young women in the future.

Q: ***Where is your campaign in its progress to eliminate the N, B, and H words from use when depicting people in African-American/Black communities, music lyrics, and common everyday word usage?***

SIMMONS: We are working with record labels, rappers, and radio stations to create a space where people won't

have to hear those words on the airwaves. Certainly not everyone's happy with it, and we still have to be careful not to create an environment where rappers can be censored. But I do believe we are close to reaching a compromise that will keep those words off the airwaves.

Q: *With its association to gay-related hate crimes and intolerant behavior, why is the "F" word not included in your platform to eliminate derogatory terms? (For clarity, the "F" word refers to the terms fag and faggot.)*

SIMMONS: I understand that some people are disappointed we didn't include the "F" word in our initial recommendation, but I think it's important to remember that this was just the opening note in what I hope will be a very long conversation. If right off the bat we had proposed that radio bleep every offensive word in the English language, then I don't think the conversation would have lasted very long.

But I believe that if people see the value in bleeping words like "bitch" and "ho," then it will create a dialogue where soon they'll see the value in eliminating words like "fag" too. Because I think the more we can express the pain these kinds of words inflict, then the more we can convince artists not to use them and radio stations not to air them.

Q: *If the claim is made that artistic expression inclusive of derogatory and inflammatory language is protected by a person's 1st Amendment Rights, what reason is there for hip-hop or rap artists to eliminate the N, B, or H words from their lyrics? Wouldn't these terms be protected, too?*

SIMMONS: I'm not saying that rappers can't say "bitch" or "ho" in their music. They're artists, and it would be very dangerous for me or anyone else to try to control how they express themselves. But what I can suggest is that we not promote that sort of expression on the airwaves. If you want to hear "bitch" and "ho" when you're in the club, then that's your choice. But it should also be your choice not to have to hear those words on the radio.

Q: *You have stated that you are a "gay activist" that is not gay which is not uncommon for our allies. We welcome you with open arms. To this end, in what way are you being proactive and/or desire to support the gay community?*

SIMMONS: I consider myself an activist for all people who face struggle and oppression in the world. That's my job. And while we've made some strides, certainly gay people still face tremendous obstacles in this society.

My hope is that when a straight person like myself identify themselves as a "gay activist," it will give other people the confidence to take a similar stance. That's particularly true in hip-hop, where I realize still we have a long way to go on this issue.

Having said that, I believe ultimately hip-hop will play a major role in ending homophobia in America. Just like the hip-hop generation has helped this generation become much less racist than its parents, I think hip-hop will help kids today become less homophobic than the past generation as well.

Q: *With being a successful music and fashion business mogul it is very interesting to know that you take time for philanthropic endeavors. With what charitable efforts are you currently involved?*

SIMMONS: I'm very active with the Rush Philanthropic Foundation, which promotes arts to disadvantaged youths. Another group I'm very involved with is the Foundation for Ethnic Understanding. It's a group run by Marc Schneier that promotes dialogue between people from different backgrounds. That's another true passion of mine.

Q: *What advice can you give to the youth in our society, especially those who identify as African American/Black and gay?*

SIMMONS: I would say that while you might perceive your path as having more obstacles than the next person's, again, try not to focus on perception. Instead, try to clean off your lenses and see that despite the negativity you might feel, the world is still filled with so many wonderful opportunities for you.

Try to see all of that opportunity and then focus on giving the world beautiful things that have lasting value. Because when you do that, the world will always give you beautiful and value in return.

Q: *If handed complete control over the manifestation of your destiny, where would you see yourself in the year 2017?*

SIMMONS: It's hard to say, because I really try to focus on the present. As they say, the yesterday is gone and tomorrow might never come. That's why everything worthwhile in life happens in the present.

But if I were told that in 2017 my family was happy and I was using my resources to help people, then I would be good with that.

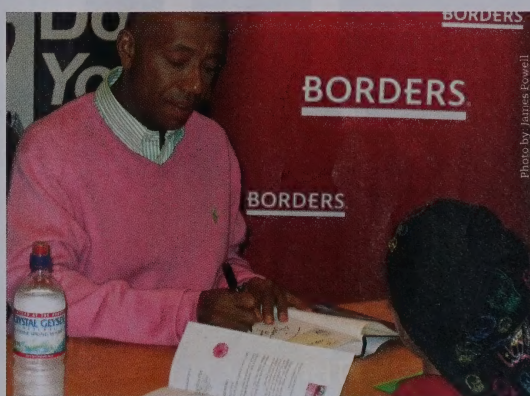


Photo by James Powell

"...I believe ultimately hip-hop will play a major role in ending homophobia in America."

Q: *When all is said and done, how would you like to be remembered?*

SIMMONS: In the book, I write that I'd be happy if when I pass, my tombstone reads: "Here lies Russell Wendell Simmons, a person who started to understand that his only purpose in life was giving back to the world."

David P. Martin is the Managing Editor, Fred Brown, Jr. is the Advertising Director, and Robert E. Crawford is the Associate Publisher for PULSE Magazine.

WHITE HEAT

Text by **ZULEKHA HAYWOOD**

NOTHING LETS US KNOW THAT SUMMER IS OFFICIALLY IN SESSION LIKE A SEA OF WHITE. CRISP, REFRESHING, AND SEXY ON ANY SKIN TONE NO OTHER COLOR LEAVES AN IMPRESSION OF EFFORTLESS SOPHISTICATION LIKE A SLIP OF WHITE. WHETHER ELEGANTLY TAILORED OR LOOSE AND BOHEMIAN, WHITE SMOOTHLY TRANSFORMS ANY LOOK FROM STANDARD TO SUBLIME.

Stylist: **LLEWELLYN JENKINS**

Assistant Stylist: **CHAD L. GROOM** Grooming: **DOUGLAS SNUGGS**

TAKE SOME of the hood out of your hoodie without sacrificing street cred in this airy nylon version.

White Anorak by ***Andrew Nowell*** *$95 (andrewnowell.com). Skincare by* ***Iman*** *Time Control Skin Refresher Lotion and Oil-Free Moisture complex SPF 15*

Photographed by **Tarrice Love**

FLIP FLOPS are a summer wardrobe staple, but white ones instantly take this beach shoe from Southampton to St. Tropez. Wearing them with other neutrals gives them substance.

White flip flops by ***Abercrombie & Fitch*** *$20, Logo flip flops by* ***Marc Jacobs*** *$30*

A WHITE BELT with a bold statement buckle can be the missing ingredient for so-so trousers or jeans.

White belt with black stripes by ***J. Crew*** *$17, Silver buckle belt by* ***J. Lindeberg*** *$125*

USHER IN a Tighty-Whitey Renaissance with these Goth-inspired boxer briefs.

Bend The Rules *$70 (bendtherules.com)*

IT TAKES a man with a certain "joie de vivre" to don white frames.

(left to right) White cut-out frames by ***Valentino*** *$199, White aviators by* ***H&M*** *$10, Wraparound frames by* ***Moschino*** *$155, Silver aviators by* ***Modern Amusement*** *$175, Black/white 80s-inspired frames by* ***Cazal*** *$220*

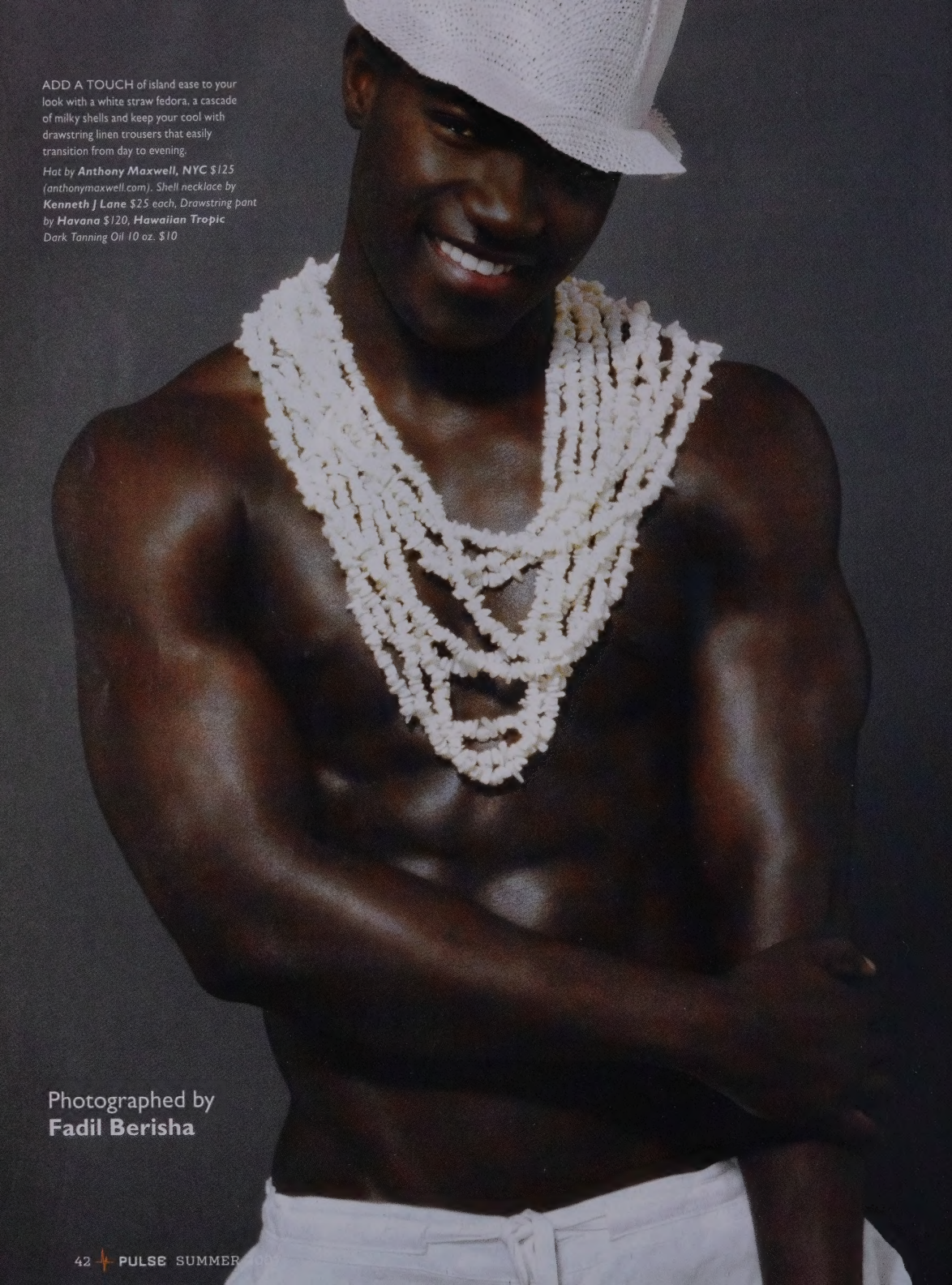
TAKE A BREAK from traditionally hued timepieces and let a pop of white leather slip from beneath that suit jacket. Choose one with a silver head to anchor the starkness of the band.

Big face timepiece by ***Kenneth Cole*** *Reaction $75, Sports watch by* ***H&M*** *$26, Triple-looped bracelet* ***Aldo*** *$23, Buckle bracelet by* ***Zara*** *$6*

Photographed by **Luiz Antonio**

WITH BEAUTIFUL packaging and complex texture, this fragrance doubles as stylish room accessories.

Jatamansi *Body Oil (8.4 fl. oz.) $95,* ***Comme des Garçons*** *"White" Eau de Toilette (1.75 fl. oz.) $66,* ***Costes*** *"White" Room Spray (3.4 fl. oz.) $79*



ADD A TOUCH of island ease to your look with a white straw fedora, a cascade of milky shells and keep your cool with drawstring linen trousers that easily transition from day to evening.

*Hat by **Anthony Maxwell, NYC** $125 (anthonymaxwell.com). Shell necklace by **Kenneth J Lane** $25 each, Drawstring pant by **Havana** $120, **Hawaiian Tropic** Dark Tanning Oil 10 oz. $10*

Photographed by
Fadil Berisha

The inspi(RED) décor for Rockefeller Plaza's "The Rainbow Room" captivated Inspirations book launch attendees.
Photo by JOHN LABBE

by Invitation Only

Conversation with Premier Celebrity Event Designer Preston Bailey

Interview by DAVID P. MARTIN

SPECIAL OCCASIONS are often celebrated with hosting a dinner or soirée to honor the moments of elation. For orchestrating high-profile spectaculars, internationally recognized event designer Preston Bailey, stands out at making memories last forever at the flick of a wrist. Think A-list stunners like Oprah's 50th birthday, Joan Rivers' daughter Melissa's wedding, and events for Bill and Camille Cosby as well as magnate Donald Trump! This past spring, after catching the exciting launch of Preston's new book, Inspirations, PULSE sat down with him for a chat.

(left) An enchanting décor in white and gold imbued Donald & Melania Trump's wedding at Mar-A-Lago in Palm Beach, FL.

Q: *You began your career as a model. Was that something you just fell into?*

PRESTON: Yeah, exactly...in the 70s. You know, when black was beautiful and if you were kind of attractive, you'd look into it. I modeled for a few years and managed to save some money. Then in the mid 70s, I opened up a clothing store along with two other people. It was on 62nd Street and 3rd Avenue in New York.

Q: *Then came floral design and event planning. I know of your book called Inspirations. Where did you get the idea for the title?*

PRESTON: Actually, from a friend.

Q: *So, is there something that or someone who inspires you in your work?*

PRESTON: My best friend, Vicente Wolf, who is an interior designer, suggested that I get into this business. I've known him for thirty years and he's always inspired me. Nature also inspires me... like Panama's beautiful rain forest. A lot of my work is about bringing in nature from outside. Two of my biggest sources of inspiration happened years ago. First, experiencing the Cherry Blossoms in Washington, D.C. was life changing for me. I like to invoke that same feeling in my work by bringing tons of flowers and creating that feeling of nature indoors.

Q: *Yes, how amazing? You capture it so well.*

PRESTON: Thank you. And it's the same feeling when I experienced fall for the first time. In Panama it's dry season or rainy season, we never experience fall. Coming here I experienced fall and it has always inspired me.

Q: *Did you always have an interest in floral designing and event planning?*

PRESTON: I had none. As a kid being gay and growing up in Panama, an interest in flowers as a career was not an option. It was fate. I needed a job. In 1980, my clothing store went out of business and I had nothing to do for a year. So, my friend Vicente Wolf suggested that I do weekly flower arrangements for two of his clients. That's how I started. As you can imagine, there were a lot of screw ups at the beginning. But I always said and I keep hearing that it's true, that if you screw up long enough you become an expert. *(both laugh)*

Q: *So, I want to go back to Panama for just a sec. What was your family structure like?*

PRESTON: I come from a very poor background. It was my parents, two brothers, two sisters, and me. I grew up around very strict Baptists. We had a great work ethic. Never been a lazy person. And I think coming from a Third World country, where work is so scarce, you learn to appreciate hard work. Whenever you got it, you kind of would run with it. *(laughs)* Part of my success can be attributed to the fact that I try to milk every opportunity that is presented t o me for what it's worth.

Q: *Oh cool. Were your family and friends supportive of you during this pursuit of floral designing?*

PRESTON: I've been in the business for 27 years now, but the first ten years were tough. And one of the reasons is that I had a serious alcohol and drug addiction at the time. Everything that I was earning was going up in smoke and poor management. So even though I worked very hard, I lost it all to partying.

Then I went sober in 1990. I only graduated from high school, so, I didn't have much education to fall back on. I knew I wasn't great at business; therefore, I just hired the right people to manage my affairs and all of that.

At one point, I owed over a million dollars in taxes due to poor management. I've learned to pay more attention, but at the time that didn't interest me at all. So, once I got an inner structure, things started changing. It took me years to

pay that money back and to really be in a place of solvency.

Q: *So you are not another overnight success?*

PRESTON: Not at all. Luckily, one of the things that I've always had is clients. Like anything else, you could say you're in business, but if you don't have any clients you don't have a business. Then, Joan Rivers gave me my big break when she picked me to do her daughter's wedding. Joan introduced me to Oprah and to many other people. Then once I appeared on Oprah, the celebrities started calling. Things sort of went from there.

Q: *What was your most memorable project?*

PRESTON: Oprah's 50th birthday party was quite extraordinary for me, Donald Trump's wedding recently, Mr. Bill Cosby's daughter's wedding. He and Mrs. Cosby were absolutely amazing to work with. Dr. Johnson, the former owner of BET.

Q: *Would any of those have been the most lavish or extravagant?*

PRESTON: You know, they all are... and I say that cautiously.

Q: *When you plan a party for yourself, would it be any different than it would be for a client?*

PRESTON: I like to entertain in a very inviting, no hassle, and welcoming kind of way. I love mixing different kinds of people. I love the idea of throwing everybody together. And let them mix it up and work it up for themselves. That tension, I think, creates an exciting party.

Q: *Recently, I was online looking for a flower delivery service and came across the Preston Bailey Signature collection at 1-800-Flowers.com. Tell me more.*

PRESTON: One of the great things about the success of my company is that we have been asked by others to partner with them to create situations for their businesses. There are two partnerships that I'm most proud. One is 1-800-Flowers with whom we have created signature collections that they use for deliveries. The second is with Sandals Resorts who approached me a couple of years ago to design four reasonably-priced, yet, beautiful packages that average people who are getting married can afford. I am very proud of these partnerships.

Q: *Could this be the beginning of a product line?*

PRESTON: I have table settings and bedding in the pipeline. We're also in discussion with different stores like Bed, Bath & Beyond.

Q: *Okay, how does Preston Bailey unwind and relax?*

PRESTON: Working out... *(he laughs)* I do... I train for the triathlon. My partner and I also travel together a lot. He is a singer and travels a lot and I meet him whenever we have a moment. We try to get away. Hanging out with friends, is another way of relaxing and giving parties.

Q: *Can you estimate how many different types of flowers or blooms exist for you to work with?*

PRESTON: First of all, there are hundreds of thousands of them.

Q: *Are they all easily accessible?*

PRESTON: Some of them easier than others. There have always been certain flowers that I loved. I'm a romantic, so I like soft beautiful roses and hydrangeas. I love the variety of orchids. I'm a little bit of a snob about flowers by the way.

I like flowers that have a great quality and I like quantity. Don't send a dozen roses; send eight dozen, if you can. If you really love someone, really show them in quantity. Please! ...people respond to that.

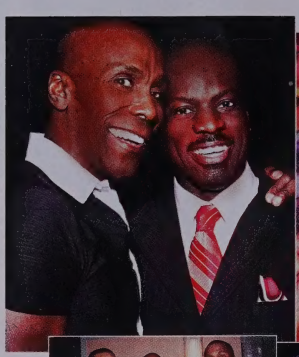
Q: *That's true. Is there a particular fragrance, floral, or color that you are fond of?*

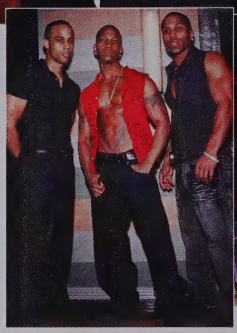
PRESTON: I love the fragrance of gardenias. I prefer colors more than white. I love lavender, hot pinks, and magentas, and all of the dried colors. Whenever you walk into a room and there's color and vibrancy, you can create a festive mood just with that alone. So the emotion that is conveyed through these colors I find fascinating.

Q: *If you could go anywhere in the world, what would be your destination of choice?*

PRESTON: I have been to most of the places that I have wanted to visit. *(laughs)* I have been to South Africa, which I really love a lot! I do want to go to Australia, but I need to set aside like two or three weeks to go there.

(top) Preston Bailey among sea of Inspirations. (left) An exquisite multicolored floral wedding scheme was created at the Four Seasons Hotel in New York, NY.





Guests at "Inspirations" book launch party. (top, L to R) Preston & GMAD's Executive Director Tokes Osubu, singer and actress Jennifer Holliday, actress and former model Toukie Smith & make-up artist Joey Mills, and Preston & PULSE Editor-in-Chief Byron Barnes. (bottom, L to R) City Gym Boys: Rome, founder Charles LaSalle & Yusuf, revelers Betsy Lovette & Robin Albaneze, and photographer John Labbe & his mother Denise Labbe. Photos by Jim Carroll.

Q: *From what I understand you don't have much time? It was so hard to get in touch with you.*

PRESTON: Yeah man, it's very difficult. The good news is, of course, that I'm traveling a lot to these wonderful places for business, and while I'm there, take a day or two here and there for myself.

Q: *As far as music, is there any particular music you prefer?*

PRESTON: I'm a huge fan... such a music lover, it's not even funny. My range goes from R&B to Latin to... I like it all... and because my boyfriend is a jazz singer... it's jazz for the moment.

Q: *Can you tell us more about your boyfriend?*

PRESTON: His name is Theo Blackmann. We met at the gym. He has opened up my eyes to the world of jazz. He has great integrity as an artist and creates quality work.

Q: *How do you balance your relationship and work?*

PRESTON: It's very hard considering he's got shows. He travels more than I do, so we try to plan ahead around our respective schedules to make time that is just for us. We may go away for a few days or something. It's like an eternal honeymoon kind of a thing. But other times it can get kind of lonely, but we work that out.

Q: *Wonderful, that is beautiful. Throughout history significant contributions, especially in the arts, have been made by men of color who identify as gay or bisexual. For the PULSE reader, could you share encouraging words to those who may be pursuing dreams or endeavors as you have?*

PRESTON: Don't let the color of your skin hold you back. I have always thought of it as an asset by the way. ... Never a liability. You have to gain the confidence and that security within yourself that stabilizes you. What I do find interesting is the reverse discrimination that also exists. If you're a person of color and you have anything to say or contribute, immediately it's heard differently and heard louder. It's almost like "oh, he's really good, he's one of the good ones" kind of thing. So in my experience, it's always worked for me.

Q: *The African American community has been hardest hit by HIV/AIDS. Is there something missing from our conversations in our neighborhoods or a responsibility not being addressed among African Americans?*

PRESTON: I think the actual educational value of it... to be told clearly what it is about. I think it is really important.... and that we are clear about it. You know, growing in the 80s and being part of a time when many people died, was the best education. Everyone has a responsibility to educate themselves as much as possible.

Q: *What are your thoughts, if any, pertaining to Senator Barack Obama's presidential bid? Is America ready for an African American president?*

PRESTON: Oh, my god, I think it is great. This is the time. Let me put it this way... America is more ready now than ever. And that's a good thing.

Q: *What would you like your legacy to be? How do you want to be remembered when all is said and done?*

PRESTON: *(sighs)* Hmmm. As someone of integrity; someone who knew how to feel through life as best as possible; creator of images that inspired people to live better in whatever way possible.

Q: *If there were one word, phrase, or quote that characterized Preston Bailey, what would that be?*

PRESTON: Lots of balls!

Q: *That's it. I appreciate your taking time out of your schedule. It's been a pleasure to talk with you.*

PRESTON: Same here. Good luck to you.

David P. Martin is the Managing Editor for PULSE Magazine.

REFLECTIONS ON
JAMES BALDWIN
(1924-1987)

Those Big Eyes! That was all that I recognized as "distinct" upon first encountering the writer James Baldwin. A fellow English major suggested I check him out after I kept complaining of my *lack of connect* with Harlem Renaissance literature; i.e., I didn't get how celebrated poet Langston Hughes was "speaking for the people." I didn't see his New York. As a fledgling writer cum artist, I thought the Harlem Renaissance was to inspire instead of confound. I found that most works spoke more to black *flight* and *fright*, than to the *fight* I imagined. Was it ignorance?

It was this same black middle class, light-skinned indifference that allowed me to initially be equally dismissive of the frail, bug-eyed Baldwin. I tried to maintain this posture, although after Another Country, One Day When I Was Lost, and Giovanni's Room, I was immediately affected by his sensitivity to words. Sure, every writer fancies himself a wordsmith able to negotiate, manipulate, and exact his or her proficiency/mastery of language to engage the reader; however, Baldwin's was almost mystic and aloof playful wizardry. The scenes he cast were vivid, rich, clear depictions of life as only *those big eyes* could possibly capture. Steeped deep in the church, the civil rights movement, as well as his reality as an openly gay black genius in an unforgiving United States, he was as unforgiving in flexing every possible literary tool at his disposal to pointedly breathe life into stories of people of color and/or controversy the world over at the hands of the oppressive rich, white, male bureaucracy/ideology.

Smart to the point of being smug, Baldwin's work informed my appreciation for finesse. He understood words and images, but, greater still, rhythm. Music found harmony and grace in the fabric of his work, as is artfully demonstrated the malleability of language is his mind's eye. Just as "hip-hop" was born out of the poetry of the ghetto put to the equally *altered* rhythm and melodies of real life, so did Baldwin place his words, his scenarios, his tales to the time and meter of Jazz, Bebop, Gospel, Blues, et al... *the cry of the day.*

The mastery of language and the art of phrasing are the two greatest of Baldwin's influences of which I find important in literature. Just Above My Head is Baldwin at the height of his literary power. This rhythmic playfulness exacting a beautiful tale of brotherly love, life, and loss in New York City *and then some*, is, in my opinion, one of his greatest, most complete literary works ever written. Ever since my first reading this book in the summer of '89, I have re-read it annually just to remind me of why I love literature, music, art, men, life and, even more, brother Baldwin. This one book had me look at every male relationship that had ever affected me in a completely different way.

Exploration, analysis, and appreciation of Baldwin's work and life inspire me to keep my own work and life informed and purposeful, in addition to being smart, honest, concise... real. It is in this spirit that PULSE editors sought out personal reflections from some current literary young guns on just how that of James Baldwin has affected their lives and/or work.

— BY JOEL BLACK

It was **ANOTHER COUNTRY**. "*This* is the great American novel," I thought after I crossed it off my extracurricular reading list in college. Certainly I had read and appreciated **GIOVANNI'S ROOM** earlier. Yet, in that literary landmark by a black gay writer, I could see no reflections of myself among the white characters...at least not in ways that mattered to me at the time as I started to explore my own identity as a high school youth. In **ANOTHER COUNTRY**; however, James Baldwin grappled directly with issues of race, gender, and sexuality in an international context with a passion and intensity that left an impression. And it is at that intersection, the complexities of identities, where I met Baldwin. For he gave me the gift of understanding not only that I was black, male, homosexual, and American, but also that *I* could define those identities—and critique them—as I chose to. As I learned more about his life...his involvement in the civil rights movement, his critique of America, his choice to be an expatriate...it illuminated a path of broader possibilities for me. That he had shared the stage with Malcolm X in a debate on race relations in America in 1961, five years after being criticized by many blacks for writing **GIOVANNI'S ROOM**, also showed me that there was a path toward pride before Stonewall. He showed me that I could accept who I was, but not let it limit who I was to become; that there was a world beyond blackness, gayness, or being American that I had a right to explore. Indeed, as I travel the globe myself these days, it is that expansiveness that guides me.

— **Bryan E. Glover**

JAMES BALDWIN CHALLENGED ME—TO MY FACE.

In 1984, I was in a college production of his play **THE AMEN CORNER** *at Yale. I hadn't read any of his work, except for the play: the story of a charismatic female pastor, whose son wants to move out of church piano playing and into the world of professional Jazz music—the world of his estranged father. I played the son, David, a surrogate for Baldwin—a complicated and wonderful part. The writing captured the allure of the church and the pull of the world of music with equal vitality. The family dynamics were visceral. It isn't a coming out play, but a few years later my own—coming out and struggle with my mother—would mirror the piece. At some point, I heard the cast would get to meet Baldwin when he came to the university. He'd see the play and talk with us afterwards.*

He never saw it. His trip was cut short and he had less than an hour with us. Baldwin was short, as I recall, and dark with piercing eyes. He said a few words to us as a group and then, the cast lined up and, one by one, Baldwin gave his blessing. I approached him, my photocopied script in hand. I told him I wanted to be an actor: **Do you really want it?** *he asked.* **Yes I do.** *I responded. Then, he said,* **Go the distance.** *Then he pulled out a pen and wrote that on page one of my script. He nodded at me, sending me on my way—an artistic and spiritual benediction from a creative ancestor.*

I have, since, read much of his work and he inspires me to tell my story—boldly, theatrically—whenever I can.

— **Steve Harper**

A POET'S WRITER

and essayist, James Baldwin was as passionate a writer as he was precise seizing language in order to be not only a change-maker in the world, but to offer a uniquely poignant voice to the American literary and cultural landscape. As among the first Black writers to be accepted in the literary canon as a "great," he paved a path for those of us weighing the balance between canonical acceptance and being a voice for our people—black, gay, and other—searching for something that honestly reflects back our beautiful ugly and our ugly beautiful.

From Baldwin, I've learned how to be a more honest writer, to be precise and careful with my words, to respect the power of language enough to avoid clichés, to trust the universality of the personal enough to share it bravely, and to understand that activism is not so much something we do, but something that emanates from our truth. The world needed to be shaken and Baldwin was among many whom did that well. I too hope to shake it into something he would be more proud of—understanding that I'm a griot who holds his legacy and impact close to my heart.

— **Tim'm T. West**

Life Ajar, Exposed for James A. Baldwin

Between seasons of sleet and hydrangeas, You were to be found just in time. There as woolen or cashmere, stacking contradiction and clarity in the same buggy. Your cayenne language, its grasp, congratulates articulate congas: mood, craft, message. James Arthur Baldwin, you gave the people nuance, ample alert, turpentine through a pop-eyed gaze. As for causes of this bleeding high noon of late: Urgency escapes us. The Oval Office is out of lies. And there's the groggy hiss of half-dozen and six: Same-sex union or gay marriage, more of life ajar, exposed. Sometimes styling syllables into meaning trips me, gaunts my stride like the rise of brothers barebacking.

— **Rodney Terich Leonard**

I Love James Baldwin

James Baldwin spoke his truth. As a reader, I am still discovering his truths and what they could mean for me as a storyteller, intellectual, human being. As a writer, I am both exhilarated and intoxicated by his insights, and challenged and motivated to do my best work. Baldwin described for me, in a very loving way that my experiences as a man who loved men, were important, critical, and valid—and that my experiences needed to be treated with care. He revealed to me that I was a caretaker and put me on notice: ***I was a storyteller and needed to be clear about the joy and pain this work brings.***

He illuminated the beauty and terror of being black in America, but never underestimated or belittled us. He shared that the price of the ticket had already been paid for, and that all I needed to do was be.

He was erudite and quite hilarious.

He left home, but he never really left home. He was brave and arrogant and sure in his abilities as a writer and as an intellectual. He has remarked that he thought he was ugly, but he was quite beautiful to me. Indeed, I was in love with him and most everything he did.

I wanted to be a writer. I imagine him smiling that toothy grin of his and telling me, "Go for it."

He mattered to me because he was a sissy and didn't hide. I loved the way he held his cigarette. I enjoyed the way he handled the public. He questioned the status quo. Baldwin's gift for understatement was the balm this little yellow Negro needed while growing up in Toledo, Ohio, feeling lost, abandoned, and ignored.

— BY STEVEN G. FULLWOOD

JAMES BALDWIN *wrote of 1940s Harlem in* **THE FIRE NEXT TIME,** *but in his keen observation and unvarnished honesty—for me as an 18-year-old first time reader of Baldwin—he seemed to perfectly describe the wretches of 1993 Chicago. His insights were my insights, only delivered with eloquence and compassion, and once openly expressed instantly affirmed my life and experience. Suddenly, I wasn't crazy or alone, but instead a figure with a place in something humbling in its profundity. Baldwin also made me see I was a part of a community gifted with unyielding faith (if sometimes fanatical and misguided) and courage. Devilishly, he whispered to me that I knew a thing or two about my community and had the right to say something about what I saw. That he could give me the keys to my own community and encourage the rise of my voice, made me fall in love with him. That he could also speak the desires of my heart in* **JUST ABOVE MY HEAD** *made me an acolyte forever. Baldwin's last novel exquisitely described the delicious, familiar sweetness of first time love between two black men, leaving me naked and wondering how his hands could reach across the decades to know and touch me so intimately. Through the impossibly high bar he set, lessons in the necessity of artistic vulnerability and demonstrations of how to speak on one's life, I write praying to one day restore the value, erase the loneliness, and encourage the survival of another black boy I'll never meet. It's the only reciprocation I can conceive worthy of the gift my Big Brother Baldwin bestowed to me.*

— BY L. MICHAEL GIPSON

THE STRONG CLEAR VOICE OF JAMES BALDWIN

I was 21 and starting out in journalism when an editor of mine gave me a copy of Baldwin's Giovanni's Room. I was suspicious. Was he saying that I, a Latino, should stick to writers of color? Or was he implying that my tastes were parochial?" At that time, Hemingway was my favorite writer: good, strong, clear prose. No fat, and a power that struck you unmistakably, with force, quietly and cumulatively. His work was undeniably brilliant, and unquestionably masculine. That night, I cracked Giovanni's Room open—grudgingly—and was almost immediately assaulted with this paragraph: *"If this were not so I would not be alone in this house tonight. Hella would not be on the high seas. And Giovanni would not be about to perish, sometime between this night and this morning, on the guillotine."* I couldn't bring myself to read any further. This wasn't Hemingway. It was Douglas Sirk. In short, at that age, James Baldwin embarrassed me. His breathless prose, his tortured (gay) lovers, his, well, *effeminacy.* Boy did I miss the boat! Years later I read Giovanni's Room again and it was a profoundly different experience. I found it compulsively readable. What once struck me as florid and overdone now seemed so much simpler, almost like a fine line drawing. I couldn't put it down. I appreciate his craftsmanship now, and also his honesty and integrity. For me as a writer, James Baldwin is more than just a trailblazer. He is a North Star to sail by—someone who, over fifty years after he first burst onto the literary scene, can still guide us, if only we let him. All you have to do is not be a punk, and give him a chance.

— BY GARY TERRACINO

SILENT OUTBREAK

SYPHILIS, ANOTHER "MONSTER" AMONGST US

BY J.P. SÁNCHEZ, M.D.

MY FRIENDS CONSTANTLY comment, "Oh you're such a germaphobe, loosen up, and just have sex!" Yes, I admit that I'm the first among my friends to raise the issue of STDs during general discussion of our sexual exploits. As a doctor, I've been inspired to do this work by a family member who died from AIDS and a desire to live as an HIV-negative gay man. Whether through my family upbringing or community, professional, and personal experiences, I've come to believe that my own health and serostatus is tied directly to the health of the community where I find my partners. And as we know, Latino and Black men who have sex with men have higher rates of sexually-transmitted diseases (STDs) than other groups. The latest emerging STD epidemic is syphilis, a disease of great historical significance to our community and an important factor associated with increasing rates of new HIV infection among Latino and Black men.

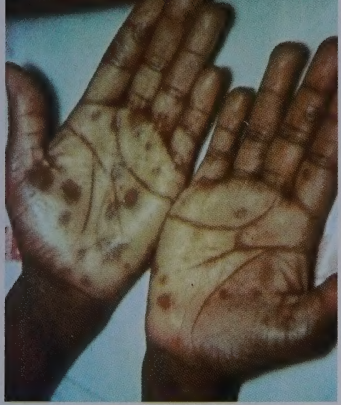
A couple of weeks ago on an outing with my boys, I raised the topic of syphilis. My company consisted of a self-proclaimed politicizing body whore, an eclectic hopeless romantic, a sarcastic effeminate pessimist, and a new cute addition to the group. What I learned from my companions was that they believed syphilis was more of an illness of "country or super-promiscuous folk" and, therefore, not a problem among our network. The reality is that nationally, those infected with syphilis are three times more likely to be black than white. Since the late 1990s, major U.S. cities have experienced outbreaks of syphilis primarily among men who have sex with men. Worse is the fact that the co-infection rate of syphilis and HIV is reported to be as high as 40%.

I must admit that initially, like my friends, I was surprised that syphilis was once again an issue in our community especially given the legacy of the infamous Tuskegee Study, which looked at the progression of syphilis among a cohort of poor black men starting in 1932. The study was stopped 40 years later after it was revealed that available treatment was intentionally withheld from its 600 participants. This atrocity, which led to a presidential apology from President Clinton, is why some in our community have such a strong distrust for the public health/medical establishment. After numerous sighs and the comical, "Whatever child, let's drink!" how could I fault their sentiments? In the wake of exhaustive HIV prevention efforts, an overwhelmed public has unwittingly allowed syphilis to re-emerge as a menace to our community.

What makes syphilis more challenging to address is that the symptoms can be easily missed or ignored. Unlike the annoying drip or burning of gonorrhea or painful herpes vesicles *(blisters)*, the initial sign of syphilis is a *painless* skin ulcer. This ulcer *(chancre sore)* can appear on the penis, or in more obscure places like under the scrotum, between the butt, in the rectum, or even in the mouth. The ulcer will disappear on its own, which often allows some to mistakenly believe its appearance was due to an ingrown hair or chaffing. What makes the ulcer so troubling is that it permits the transmission of HIV to occur more easily.

If not treated, the infection will manifest as a reddish-brown rash appearing on the palms of the hands, soles of the feet, and extend over the entire body. As with the initial ulcer *(primary syphilis)*, the rash *(secondary syphilis)* also disappears on its own. If secondary syphilis is left untreated (or the person's immune system is not well or immune compromised as with people with HIV), the infected person runs the risk of developing permanent brain, eye, heart, and bone damage or death due to syphilitic infection of the brain *(tertiary syphilis)*.

Despite the gloomy prospects, there is good news! Syphilis is preventable and curable. Prevention starts by using latex or polyurethane condoms with water-soluble lubricants for ALL types of sex (oral, rectal, or vaginal) with ALL partners. In order to diagnose syphilis, a physical exam and blood test are necessary. During the primary stage of infection, treatment is one shot of penicillin (in the butt!). If in the secondary stage, treatment consists of three shots of penicillin (once per week for 3 weeks in a row). And, within the third stage (diagnosed by a spinal tap or "lumbar puncture"), treatment is by intravenous penicillin for at least 14 days. If someone is allergic to penicillin, they can be "sensitized" to the medication in the hospital or sometimes given another antibiotic. All persons with syphilis should also be tested for HIV, because having both HIV and syphilis may affect the treatment. Weeks to months after treatment,



the blood level of syphilis antibodies should decrease dramatically indicating the syphilis has been cured. If not, the person may have been re-infected or the treatment provided ineffective. A follow-up visit with your health care provider is essential after being treated for syphilis.

Discussions about syphilis with friends during your leisure may be awkward or frowned upon, but the information shared may prove to be invaluable. A couple of nights after hanging out with my boys, I got a phone call at 2am from one of them. I could tell from his voice, even in my drowsy state, he wasn't about to share a "sex-capade." It was something serious. He had received a call from a person he'd been intimate with, who disclosed having syphilis and told him to get tested. My friend was agitated, not because of the possible syphilis exposure, but by the fact that he may have also been exposed to HIV. I deal with STD infections everyday as a doctor, but I'm still blown away when it happens to a friend. Talking about STDs may be burdensome or unpopular, but communication about such topics is the first step to controlling this latest epidemic.

If you have any further questions or would like an educational video about syphilis feel free to contact: John Paul Sánchez, M.D., M.P.H. at josanche@montefiore.org. Additional information can also be attained through your health care provider, local health department, or the Centers for Disease Control and Prevention (www.cdc.gov).

Collaborating on this article with Dr. Sánchez were Kwame Gyasi, M.B.A., MSII and John Nelson, NP, Ph.D.

SELF-ASSESSMENT QUIZ ON SYPHILIS AWARENESS

The following questions were utilized to evaluate the effectiveness of an educational intervention to promote syphilis knowledge and testing. Complete the following questions and assess your own understanding of syphilis:

1. Which statement about syphilis and HIV is true:
- ○ A) syphilis sores make it easier to get HIV infection
- ○ B) syphilis infection can cause AIDS
- ○ C) syphilis sores do not increase your risk for HIV infection
- ○ D) syphilis and HIV are the only sexually transmitted diseases that are important
- ○ E) none of the above

2. You are at increased risk for syphilis infection by:
- ○ A) taking medications after sex
- ○ B) not urinating or "peeing" after sex
- ○ C) not washing up after sex
- ○ D) having unprotected sex with multiple partners
- ○ E) all of the above

3. Syphilis can be transmitted by:
- ○ A) sharing towels
- ○ B) oral sex
- ○ C) drinking from the same cup
- ○ D) shaking hands
- ○ E) all of the above

4. A common symptom of syphilis infection is:
- ○ A) coughing
- ○ B) penile or vaginal discharge
- ○ C) sore that does not hurt
- ○ D) diarrhea
- ○ E) all of the above

5. You can reduce your risk for syphilis infection by:
- ○ A) urinating or "peeing" after sex
- ○ B) reducing your number of partners
- ○ C) washing up after sex
- ○ D) taking medications before sex
- ○ E) all of the above

6. Which statement about syphilis treatment is true:
- ○ A) syphilis is curable
- ○ B) once treated you can not be re-infected with syphilis
- ○ C) once the sore or rash disappears the person no longer requires treatment
- ○ D) sexual partners of those infected with syphilis do not need to be tested
- ○ E) none of the above

7. Syphilis transmission can be prevented by:
- ○ A) washing your hands after shaking someone's hands
- ○ B) only using your own towel
- ○ C) drinking from your own cup
- ○ D) wearing condoms during sex
- ○ E) all of the above

8. Which statement about syphilis and HIV infection is true:
- ○ A) you can not be infected with syphilis and HIV through sex
- ○ B) treating syphilis sores can help to reduce your risk for HIV infection
- ○ C) only gay men are at risk for HIV and syphilis infection
- ○ D) both syphilis and HIV infection can be cured
- ○ E) none of the above

9. Which statement about syphilis treatment is true:
- ○ A) syphilis is not curable
- ○ B) once a person is treated their partner does not have to be tested for infection
- ○ C) syphilis persists without treatment
- ○ D) even with treatment sores do not go away
- ○ E) none of the above

10. Treating syphilis infection can prevent:
- ○ A) infertility
- ○ B) organ damage
- ○ C) cancer
- ○ D) stroke
- ○ E) all of the above

Use the key below to tally your answers and determine your awareness level.

1. a, 2. d, 3. b, 4. c, 5. b, 6. a, 7. d, 8. b, 9. c, 10. b.

1-5 correct **(BELOW AVERAGE)** 6-8 correct **(AVERAGE)** 9-10 correct **(STRONG)**

Indication

LEXIVA is indicated in combination with other antiretroviral agents for the treatment of HIV infection in adults.

- The PI-experienced patient study was not large enough to reach a definitive conclusion that LEXIVA/ritonavir and lopinavir/ritonavir are clinically equivalent.
- Once-daily administration of LEXIVA/ritonavir is not recommended for PI-experienced patients.

LEXIVA does not cure HIV or prevent passing HIV to others.

Important Safety Information

- You should not take LEXIVA if you have had an allergic reaction to LEXIVA or AGENERASE® (amprenavir).
- High blood sugar, diabetes or worsening of diabetes, and bleeding in hemophiliacs have occurred in some patients taking protease inhibitors.
- When you start taking HIV medicines, your immune system may get stronger and could begin to fight infections that have been hidden in your body, such as pneumonia, herpes virus, or tuberculosis. If you have new symptoms after starting your HIV medicines, be sure to tell your doctor.
- Changes in body fat may occur in some patients taking antiretroviral therapy. The cause and long-term health effects of these conditions are not known at this time.
- Skin rashes can occur in patients taking LEXIVA. Rarely, rashes were severe or life threatening.
- Opportunistic infections can develop when you have HIV and your immune system is weak. It is very important that you see your healthcare provider regularly while you are taking LEXIVA to discuss any side effects or concerns.
- Most common side effects in clinical studies were diarrhea, headache, nausea, rash, and vomiting. In most cases, these side effects did not cause people to stop taking their medicine.

Drug Interactions

- LEXIVA should not be taken with: AGENERASE® (amprenavir), Halcion® (triazolam), ergot medications (Cafergot®, Migranal®, D.H.E. 45®, and others), Propulsid® (cisapride), Versed® (midazolam), Orap® (pimozide), Zocor® (simvastatin), Mevacor® (lovastatin), Rifadin® (rifampin), Rescriptor® (delavirdine mesylate), or St. John's wort (Hypericum perforatum). If you are taking Norvir® (ritonavir), you should not take Tambocor® (flecainide), or Rythmol® (propafenone hydrochloride).
- Serious and/or life-threatening events could occur between LEXIVA and other medications, including Cordarone® (amiodarone), lidocaine (intravenous only), Elavil® (amitriptyline HCl) and Tofranil® (imipramine pamoate), tricyclic antidepressants, and Quinaglute® (quinidine).
- Women who use birth control pills should choose a different kind of birth control. The use of LEXIVA with Norvir (ritonavir) in combination with birth control pills may hurt your liver. Also, birth

control pills may not work if you take LEXIVA or LEXIVA with Norvir. Talk to your healthcare provider about choosing the right birth control for you.

- Patients taking Viagra® (sildenafil citrate) or LEVITRA® (vardenafil HCl) with LEXIVA may be at an increased risk of side effects.
- This list of drug interactions is not complete. Be sure to tell your healthcare provider about all medicines you are taking or plan to take, including over-the-counter drugs, vitamins, and herbals.

Resistance

- Missing or skipping doses of your medicine may make it easier for the virus to mutate and multiply. Your medicines may not work as well against a mutated virus and you may become cross-resistant to other HIV medicines. It's important to take your medicine exactly as prescribed.

Please see important information on adjacent page.

If you don't have prescription coverage and can't afford your medicines, visit pparx.org, or call 1-888-4PPA-NOW (1-888-477-2669)

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DHHS Guidelines now recommend LEXIVA/ritonavir

They rely on me, I rely on a regimen with LEXIVA

If it's time to start HIV treatment, ask your doctor if LEXIVA plus ritonavir may be right for you.

With LEXIVA plus ritonavir you can:

- Take once a day*
- Eat and drink when you want
- Take antacids and other heartburn medications†
- Have a lower chance of diarrhea‡

*Once-daily dosing is not recommended for patients who have taken protease inhibitors in the past.

†LEXIVA without ritonavir may be less effective due to decreased blood levels of amprenavir when taking H_2 antagonists with LEXIVA. No dose adjustments required with PPIs when taken at the same time as LEXIVA.

‡10% rate of moderate-to-severe drug-related diarrhea in therapy-naive patients compared to 18% for nelfinavir.

LEXIVA does not cure HIV or prevent passing HIV to others.

Individual results may vary.

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PATIENT INFORMATION

LEXIVA®
(lex-EE-vah)
(fosamprenavir calcium) Tablets

Read the Patient Information that comes with LEXIVA before you start taking it and each time you get a refill. There may be new information. This information does not take the place of talking with your healthcare provider about your medical condition or treatment. It is important to remain under a healthcare provider's care while taking LEXIVA. **Do not change or stop treatment without first talking with your healthcare provider.** Talk to your healthcare provider or pharmacist if you have any questions about LEXIVA.

What is the most important information I should know about LEXIVA?
LEXIVA can cause dangerous and life-threatening interactions if taken with certain other medicines. Tell your healthcare provider about all the medicines you take, including prescription and nonprescription medicines, vitamins, and herbal supplements.

- Some medicines cannot be taken at all with LEXIVA.
- Some medicines will require dose changes if taken with LEXIVA.
- Some medicines will require close monitoring if you take them with LEXIVA.

Know all the medicines you take, including prescription and nonprescription medicines, vitamins and herbal supplements. Keep a list of the medicines you take. Show this list to all your healthcare providers and pharmacists anytime you get a new medicine or refill. Your healthcare providers and pharmacists must know all the medicines you take. They will tell you if you can take other medicines with LEXIVA. **Do not start any new medicines while you are taking LEXIVA without talking with your healthcare provider or pharmacist.** You can ask your healthcare provider or pharmacist for a list of medicines that can interact with LEXIVA.

What is LEXIVA?

LEXIVA is a medicine you take by mouth to treat HIV infection. HIV is the virus that causes AIDS (acquired immune deficiency syndrome.) LEXIVA belongs to a class of anti-HIV medicines called protease inhibitors. LEXIVA is always used with other anti-HIV medicines. When used in combination therapy, LEXIVA may help lower the amount of HIV found in your blood, raise CD4+ (T) cell counts, and keep your immune system as healthy as possible, so it can help fight infection. However, LEXIVA does not work in all patients with HIV.

LEXIVA does not:

- cure HIV infection or AIDS. We do not know if LEXIVA will help you live longer or have fewer of the medical problems (opportunistic infections) that people get with HIV or AIDS. Opportunistic infections are infections that develop because the immune system is weak. Some of these conditions are pneumonia, herpes virus infections, and *Mycobacterium avium* complex (MAC) infections. **It is very important that you see your healthcare provider regularly while you are taking LEXIVA.** The long-term effects of LEXIVA are not known.
- lower the risk of passing HIV to other people through sexual contact, sharing needles, or being exposed to your blood. For your health and the health of others, it is important to always practice safer sex by using a latex or polyurethane condom to lower the chance of sexual contact with semen, vaginal secretions, or blood. Never use or share dirty needles.

LEXIVA has not been fully studied in children under the age of 18 or in adults over the age of 65.

Who should not take LEXIVA?

Do not take LEXIVA Tablets if you:

- are taking certain other medicines. Read the section "**What is the most important information I should know about LEXIVA?**" Do **not** take the following medicines* with LEXIVA. You could develop serious or life-threatening problems.
  - HALCION® (triazolam; used for insomnia)
  - Ergot medicines: dihydroergotamine, ergonovine, ergotamine, and methylergonovine such as CAFERGOT®, MIGRANAL®, D.H.E. 45®, ergotrate maleate, METHERGINE®, and others (used for migraine headaches)
  - PROPULSID® (cisapride), used for certain stomach problems
  - VERSED® (midazolam), used for sedation
  - ORAP® (pimozide), used for Tourette's disorder

Do **not** take the following medicines if you are taking LEXIVA and NORVIR® (ritonavir) together. You could develop serious or life-threatening problems.

- TAMBOCOR® (flecainide), used for certain abnormal heart rhythms
- RYTHMOL® (propafenone), used for certain abnormal heart rhythms

- **are allergic to LEXIVA or any of its ingredients.** The active ingredient is fosamprenavir calcium. See the end of this leaflet for a list of all the ingredients in LEXIVA.
- **are allergic to AGENERASE® (amprenavir).**

You should not take AGENERASE (amprenavir) and LEXIVA at the same time.

Before taking LEXIVA, tell your healthcare provider about all your medical conditions including if you:

- **are pregnant or planning to become pregnant. It is not known if LEXIVA can harm your unborn baby. You and your healthcare provider will need to decide if LEXIVA is right for you. If you use LEXIVA while you are pregnant, talk to your healthcare provider about how you can be on the Antiretroviral Pregnancy Registry.**
- **are breastfeeding.** You should not breastfeed if you are HIV-positive because of the chance of passing the HIV virus to your baby through your milk. Also, it is not known if LEXIVA can pass into your breast milk and if it can harm your baby. If you are a woman who has or will have a baby, talk with your healthcare provider about the best way to feed your baby.
- **have liver problems.** You may be given a lower dose of LEXIVA or LEXIVA may not be right for you.
- **have kidney problems**
- **have diabetes.** You may need dose changes in your insulin or other diabetes medicines.
- **have hemophilia**
- **are allergic to sulfa medicines**

Before taking LEXIVA, tell your healthcare provider about all the medicines you take, including prescription and nonprescription medicines, vitamins, and herbal supplements. LEXIVA can cause dangerous and life-threatening interactions if taken with certain other medicines. You may need dose changes in some of your medicines or closer monitoring with some medicines if you also take LEXIVA (see "**What is the most important information I should know about LEXIVA.**"). **Know all the medicines that you take and keep a list of them with you to show healthcare providers and pharmacists.**

Women who use birth control pills should choose a different kind of contraception. The use of LEXIVA with NORVIR (ritonavir) in combination with birth control pills may be harmful to your liver. The use of LEXIVA with or without NORVIR may decrease the effectiveness of birth control pills. Talk to your healthcare provider about choosing an effective contraceptive.

How should I take LEXIVA?

- Take LEXIVA Tablets exactly as your healthcare provider prescribed.
- **Do not take more or less than your prescribed dose of LEXIVA Tablets at any one time.** Do not change your dose or stop taking LEXIVA without talking with your healthcare provider.
- You can take LEXIVA Tablets with or without food.
- When your supply of LEXIVA or other anti-HIV medicine starts to run low, get more from your healthcare provider or pharmacy. The amount of HIV virus in your blood may increase if one or more of the medicines are stopped, even for a short time.
- Stay under the care of a healthcare provider while using LEXIVA.
- It is important that you do not miss any doses. If you miss a dose of LEXIVA by more than 4 hours, wait and take the next dose at the regular time. However, if you miss a dose by fewer than 4 hours, take your missed dose right away. Then take your next dose at the regular time.
- If you take too much LEXIVA, call your healthcare provider or poison control center right away.

What should I avoid while taking LEXIVA?

- **Do not use certain medicines while you are taking LEXIVA.** See "What is the most important information I should know about LEXIVA" and "Who should not take LEXIVA?"
- **Do not breastfeed. See "Before taking LEXIVA, tell your healthcare provider". Talk with your healthcare provider about the best way to feed your baby.**
- **Avoid doing things that can spread HIV infection** since LEXIVA doesn't stop you from passing the HIV infection to others.
- **Do not share needles or other injection equipment.**
- **Do not share personal items that can have blood or body fluids on them, like toothbrushes or razor blades.**
- **Do not have any kind of sex without protection.** Always practice safer sex by using a latex or polyurethane condom to lower the chance of sexual contact with semen, vaginal secretions, or blood.

What are the possible side effects of LEXIVA?

LEXIVA may cause the following side effects:

- **skin rash.** Skin rashes, some with itching, have happened in patients taking LEXIVA. Tell your healthcare provider if you get a rash after starting LEXIVA.
- **diabetes and high blood sugar (hyperglycemia).** Some patients had diabetes before taking LEXIVA while others did not. Some patients may need changes in their diabetes medicine. Others may need a new diabetes medicine.
- **increased bleeding problems in some patients with hemophilia.**
- **worse liver disease.** Patients with liver problems, including hepatitis B or C, are more likely to get worse liver disease when they take anti-HIV medicines like LEXIVA.
- **changes in blood tests.** Some people have changes in blood tests while taking LEXIVA. These include increases seen in liver function tests and blood fat levels, and decreases in white blood cells. Your healthcare provider may do regular blood tests to see if LEXIVA is affecting your body.
- **changes in body fat.** These changes have happened in patients taking antiretroviral medicines like LEXIVA. The changes may include an increased amount of fat in the upper back and neck ("buffalo hump"), breast, and around the trunk. Loss of fat from the legs, arms, and face may also happen. The cause and long-term health effects of these conditions are not known at this time.

Common side effects of LEXIVA are nausea, vomiting, and diarrhea. **Tell your healthcare provider about any side effects that bother you or that won't go away.**

This list of side effects of LEXIVA is not complete. For more information, ask your healthcare provider or pharmacist.

How should I store LEXIVA Tablets?

- Store LEXIVA Tablets at room temperature between 59° and 86°F (15° to 30°C). Keep the container tightly closed.
- **Keep LEXIVA and all medicines out of the reach of children.**
- Do not keep medicine that is out of date or that you no longer need. Be sure that if you throw any medicine away, it is out of the reach of children.

General information about LEXIVA

Medicines are sometimes prescribed for conditions that are not mentioned in patient information leaflets. Do not use LEXIVA for a condition for which it was not prescribed. Do not give LEXIVA to other people, even if they have the same symptoms you have. It may harm them.

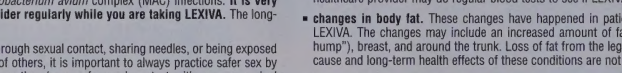
This leaflet summarizes the most important information about LEXIVA. If you would like more information, talk with your healthcare provider. You can ask your pharmacist or healthcare provider for information about LEXIVA that is written for health professionals. For more information you can call toll-free 888-825-5249 or visit www.LEXIVA.com.

What are the ingredients in LEXIVA?

Active Ingredient: fosamprenavir calcium.

Inactive Ingredients: colloidal silicon dioxide, croscarmellose sodium, magnesium stearate, microcrystalline cellulose, and povidone K30. The tablet film-coating contains the inactive ingredients hypromellose, iron oxide red, titanium dioxide, and triacetin.

LEXIVA Tablets, 700 mg, are pink in color and are capsule-shaped, with the letters "GX LL7" printed on one side of the tablet.



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GlaxoSmithKline
GlaxoSmithKline
Research Triangle Park, NC 27709

VERTEX
Vertex Pharmaceuticals Incorporated
Cambridge, MA 02139

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In The Black:

Strategies for Planning Ahead & Moving Forward

by Dane A. Campbell, a Financial Representative with the NEMEC Financial Group of The Northwestern Mutual Financial Network

LIFE IS FULL OF SURPRISES. When two people decide to enter a long term relationship, it is usually a joyous experience. While the jubilation can be fleeting (if separation or death occurs), it's important to make some serious decisions. That's why proactive planning can make a world of difference.

Planning Ahead

Early preparation can help a couple have greater peace of mind now and down the road. Here are strategies to jumpstart the process:

• **START THE CONVERSATION** - The first step is to begin a dialogue with one's partner and family – as difficult as that conversation may be.

• **KNOW WHAT YOU HAVE** – Familiarize yourself with all of your – and your partner's – assets, even if he is the "financial decision maker" in the family. Learn about all bank accounts, retirement accounts, tax returns, insurance coverage, life insurance policies, etc.

• **DEVELOP A WILL** – Putting together a will can help couples think through and solidify financial and personal matters. This will give you (and him) a say in where your assets go – without the courts making the decision for you.

It may help to schedule a consultation with a financial professional, a family, or estate attorney. Their expertise can help you ask the right questions, identify your needs, define goals, and make key decisions.

Build Wealth

There's no reliable way to get rich quick. However with proper planning, people can amass a sizeable estate by using good judgment and some savvy investing. Be consistent: the foundation for wealth accumulation is defensive planning. Couples need to create "safety nets" to help protect against loss. This can be achieved with life insurance and disability income insurance. Once a strong baseline is in place, the second step is to begin the investment stage. Investment options should be chosen on the basis of suitability (how appropriate it is to your needs) and objective (what the purpose of the money is). To protect against tax consequences, couples often name each other as beneficiaries and may also place the proceeds in a trust, which is a way to have money managed by an entity for the benefit of another person. Of course, this scenario is not appropriate for *every* couple, but it is a common solution.

Death and Taxes

In this country the unfortunate fact is that tax laws are written specifically for heterosexual couples. There is little – if any – legal protection for same sex couples. The result is often times a slew of estate taxes and the litigation that almost always follows a death or separation. Citizenship also plays a huge role. All residents of the U.S. are generally taxed the same at death, regardless of citizenship status. However, there is an important difference in the way citizens and non-citizens can transfer money *especially* when they are not technically "married." If the surviving partner is not a US citizen, the only way to defer estate taxes until the second death is to place money (in excess of the current $2 Million estate tax exemption) into a special trust called a Qualified Domestic Trust or "QDOT." With this, Uncle Sam is willing to wait until the second partner dies to collect the estate tax. A QDOT may not be the answer for everyone in this situation. Some alternatives to help you achieve your financial goals despite not being married are:

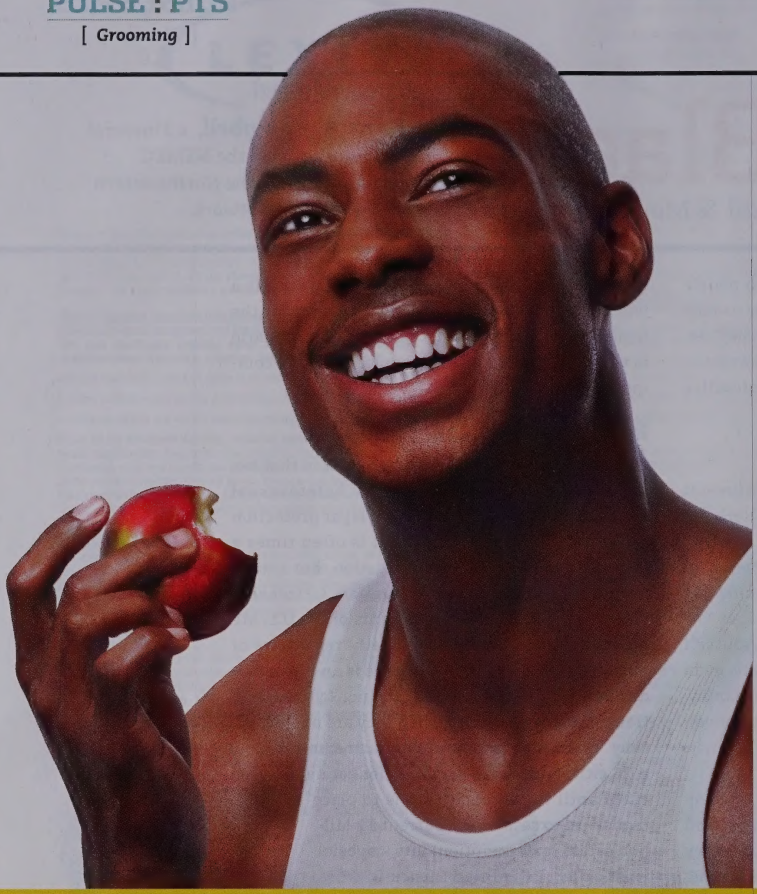
• **PURCHASE LIFE INSURANCE**. Life insurance is one way to provide the surviving partner with immediate tax free money.

• **GIVE IT AWAY NOW**. giving property to a non-citizen partner during THEIR LIFETIME is oneway to minimize the gifting restrictions. Currently, up to $117,000 can be transferred each year without gift tax if the receiving person is a non-citizen.

Finally, perhaps the most important place to begin is with a plan. Start the discussion, create a list of concerns and objectives, and seek advice.

Contact Dane by phone at (212) 819-1800 or visit, www.nmfn.com/danecampbell.

Photo by Daniel Green



An apple a day keeps the dentist away...

MAINTAINING GREAT oral hygiene pays dividends way into your senior years. The American Dental Association (ADA) recommends that you:

- Visit your dentist every six months for professional cleanings and oral exams.
- Brush your teeth *(with ADA-approved fluoride toothpaste)* and floss twice daily to prevent tooth decay, gum disease, and other oral hazards.
- Replace your toothbrush every three months, or when the bristles appear worn or frayed.
- Limit between-meal snacking and sugary foods that lay on the teeth and gums for extended periods of time.

Don't worry so much about the receding hairline and the extra pounds; one sure-fire way to take years off your appearance is by whitening your teeth, either with a home or professional whitener. Each time you smile, you will feel more confident and approachable. Don't know where to start? No problem. You know we always keep you on the PULSE!!! Here are a couple of ways to keep those beautiful white piano keys in tune.

PEARLY WHITES

by **Chad L. Groom**

Plus White 5 Minute Speed Whitening Gel - *One step bleaching power—fast and easy. In just five minutes your teeth will experience effective bleaching action. For very stained teeth, leave gel on for 15 to 20 minutes. Use twice a day for two weeks, then continue once a week to maintain the desired whitening level. This gel can be used with mouth trays for excellent results.*

Crest Whitestrips Renewal - *Age-Defying Strips reduce the physical of aging on teeth. This enamel safe formula is infused with the same ingredients dentists use.*

Crest Whitening Rinse - *This triple action mouthwash whitens teeth, protects against stains, and kills bad breath germs. It is alcohol free with a fresh mint taste.*

Oral-B Rembrandt Whitening Pen - *An effective all-in-one spot treatment gel for stubborn stains and discoloration of teeth.*

Aquafresh White Trays - *These flexible trays are easy to apply; they mold securely around your teeth allowing the fresh tasting gel to whiten even between teeth. Your teeth will visibly whiten in three days.*

Crest Vivid White Night - *Crest Vivid White Night is a nightly toothpaste that coats your teeth, loosening surface stains to help you brush them away in the morning the final result powerful whitening for a healthy, beautiful smile.*

Photo by Tarrice Love, Product Photo: Daniel Green, Stylist: Shaun Christopher Levy, Model: Corey - Identities Inc. Grooming: Douglas Snuggs

CLOSE SHAVE

The daily ritual of shaving is something many of us don't look forward to. The raging battle with ingrown hairs, skin irritation, discoloration and razor bumps can leave scars which are not only physically unappealing, but can affect a person's level of confidence. To the rescue comes a surge of great new products just for us.

The Art of Shaving consistently masters a man's daily shave routine. Its dedication to the science of aromatherapy is the foundation of their product philosophy. The Art of Shaving expertly designs and handcrafts each razor to ensure optimum comfort and balance. Their badger brushes represent elegance and durability. Visit: theartofshaving.com

PULSE Picks:

From The Art of Shaving

Ingrown Hair Night Cream

Effectively accelerates the relief of ingrown hairs and razor bumps. Pure, unrefined African shea butter softens the skin, allowing ingrown hairs to break free, as jojoba oil moisturizes and unclogs pores. White willow bark and meadowsweet extract, containing salicilin, gently exfoliate and release trapped hairs. Therapeutic essential oils reduce inflammation, while botanical extracts rich in fruit acids improve the skin's texture. This product provides a 93% reduction of ingrown hairs within six weeks. For all skin types 1.7 fl. oz. - $40

From BARC

Bump Down

If you should still experience some shaving irritation, Barc has come up with the perfect alcohol-free razor bump repair treatment, aptly named bump down. Visit getbarc.com for more information.

From Carol's Daughter, NYC

Gordon's Shaving Lotion

A baby smooth shave for the man in the mirror. It's just what the doctor ordered. Smooth on this non-irritating, skin-softening shaving lotion. Follow with Carol's Daughter's Rose and Chamomile Toner to freshen your skin and tighten your pores, infused with rose, chamomile, juniper berries and vodka. Visit: carolsdaughter.com

THE MAGNIFICENT 7

IMPULSE

THESE SEVEN YOUNG 'IT' MODELS from the agency Identities Inc., NYC all possess great looks, remarkable intelligence, and unique personalities. Über agent Tim Harris, the master mind behind Identities, says "You can see star quality shining through a model's newness." His stable of thoroughbreds are the newest stars of countless national ads, runway shows, television commercials, and fashion editorials. PULSE is proud to introduce this stellar lineup that is destined for the top.

With handsome good looks from a blend of African American and Dominican ancestry, **JASON DANZA** is the new face of a multi-ethnic global society. His distinctive eyes and lean, slick body are sure to garner him a permanent place in the world of high fashion.

A brand new face and appearing in his first editorial, **COREY MIDDLETON** has a perfect blend of youthful innocence and sensuality. His megawatt smile, bright eyes, and trim swimmer's build make him absolutely magnetic and the quintessential boy next door.

SIDNEY WILSON is "The Body" with the superhero-like physique. This celebrity personal trainer has modeled for *Men's Health* and recounts Rocawear, Calvin Klein, Ralph Lauren, and Timberland among his favorite clients.

FRANK GUYTON's deep-set eyes, rugged sex appeal, and stature make him a favorite of designers Rocco Barocco, Ermenegildo Zegna, and Paul Zileri and have landed him editorials in *GQ South Africa* and *Primo Emporio*.

LAWRENCE ANNUNZIATA has editorials for many magazines like *M.R.*, *Drum*, and *Platinum* to name a few. With bookings for Enyce and, more recently, an Escada TV commercial, his striking face and flawless skin, really make him a standout.

JOSH COSTA's cinema good looks have landed him numerous modeling assignments and the lead role in his first feature Indie film *Cross to Cannon Valley*, produced by legendary director Francis Ford Coppola.

A quiet earthquake of sensuality and allure, **DANIEL BLALOCK** has been causing quite a stir in the fashion industry. He's booked Timberland, Abercrombie & Fitch, J.C. Penney, Target, and countless editorials. Industry insiders are already heralding him as the face of 2008.

Photographed by: **Fadil Berisha**
Stylist: **Llewellyn Jenkins**
Assistant Stylist: **Chad L. Groom**
Hair: **Vincent Lindsey Green**
Grooming: **Lenny Hamilton**

Kenwyn's
Silk jacket by CANALI $695
Floral shirt by JOHNNY KENT $96
Floral Jean by FORNITURE CIVILI $120
Sandals by HERMES $375
You are invited to our
Garden Party
Attire: Floral 'your way'
Photographed by
LUIZ ANTONIO
Fashion Director:
LLEWELLYN JENKINS

Orrin's
Shirt by Just Cavalli $450
Pink pant by Whipcord $80

Lawrence's
Floral Jean by D&G $525
Silk Shirt by Etro $475
Flip Flops by H&M $6

Daniel's
Nehru shirt by Roberto Cavalli $275
Black Short by Marc Jacobs $325
Fragrance - CK One Summer
by Calvin Klein

Raphael's
Floral Shirt by JOHNNY KENT $96
Polished cotton pant by SIMBOLS $92
Hat by ANTHONY MAXWELL NEW YORK *(price upon request)*
Fragrance - Hugo by HUGO BOSS

Kenwyn's
Lime Floral shirt by JOHNNY KENT $96
Lime flat front jean by FEUME $94
Frank's
Shirt by SCOTT LANGTON $180
Pant by LUCK IN LUCK $80
Flip Flops by H&M $5.90

Assistant Stylist:
Chad L. Groom
Home Furnishings Editor:
Lorenzo McCain
Table Designs by:
Crate & Barrel
Food Stylist:
Terence Taitt
All Food by:
Fresh Direct
Grooming:
Vincent Lindsey Green
Floral Designs by:
Margaret Malendrino
Garden courteous of
Kim Sales & Thomas Crawley

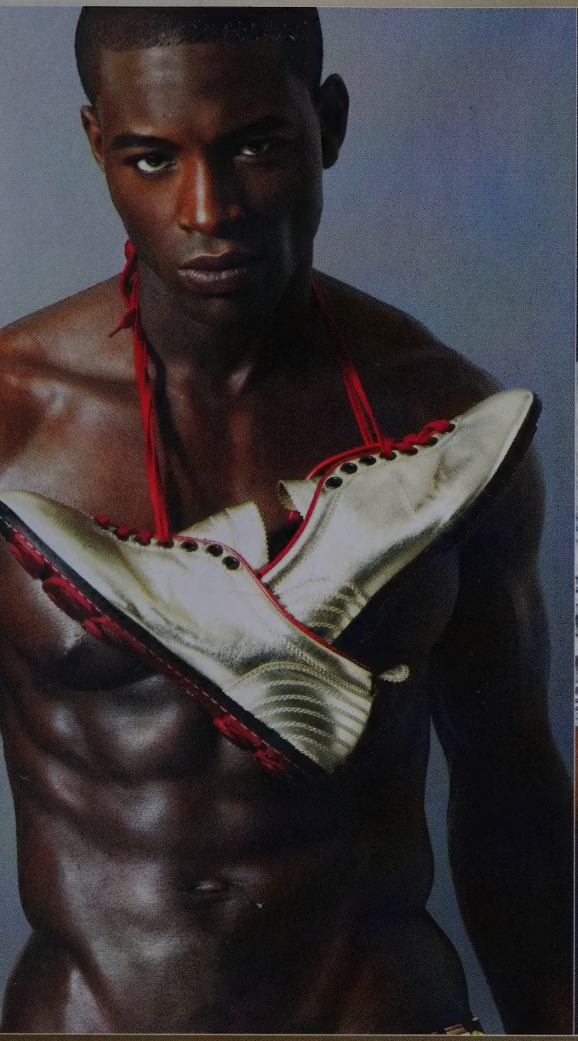
KILLAH SHORTS

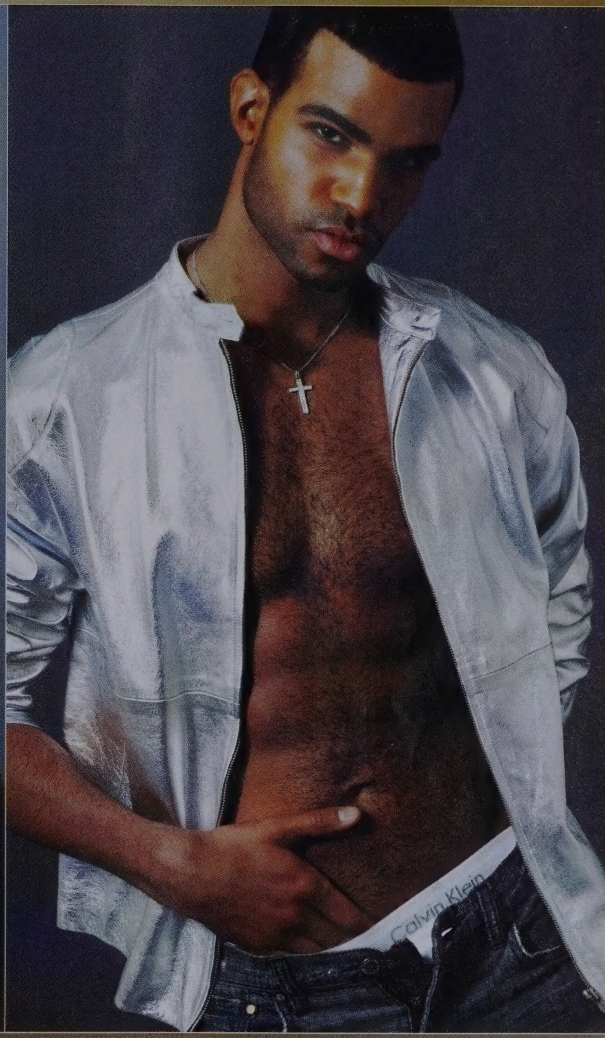
SLAY 'EM ALL SUMMER long in *everything from three-quarter khakis and crisp plaid preppies to Dolce Gabbana "Fight Club" boxing shorts. Here are some the season's best cutoffs...*

ON JABAR: *Tank by* **Fruit of the Loom**, *Short by D&G $320, Socks by* **Wilson** *$7.*

IN BASKET: *Dark denim cutoffs by* **H&M** *$50, Cocoa cargo short by* **American Eagle** *$39, Black printed short by* **Uncut NYC** *$42, Blue plaid short by* **Abercrombie & Fitch** *$59, Khaki short by* **Brooks Brothers** *$80, Green plaid short by* **Old Navy** *$15*

Photographer: **William Elliot Springfield**
Stylist: **Llewellyn Jenkins**
Assistant Stylist: **Chad L. Groom**
Grooming: **Douglas Snuggs**





Photographed by: Fadil Berisha. Stylist: Llewellyn Jenkins. Assistant Stylist: Chad L. Groom, Grooming: Vincent Lindsey Green

Editor's Find

Summer Report

Precious Metals

THE GOLD RUSH OF '07 IS ON and gold sneakers are the BIG "must have" accessory this summer. Everyone from ***Nike*** to ***Dirk Bikkembergs*** has a brand new shiny pair in stores nationwide. My pick is this slick offering by ***Pantofolo D'oro $175*** that I found at ***Tootsi Plohound NYC***. *...I'm livin' my life like it's golden this summer!*

Not to be outdone, silver is showing up in everything from eyewear to clothing. Frank's thin leather jacket by ***DKNY $675*** caught my eye, giving a silver lining to those brisk summer evenings. Underwear by ***Calvin Klein $16***, Jeans by ***Ernest Sewn $270***, Necklace by ***Tiffany & Co. $575***.

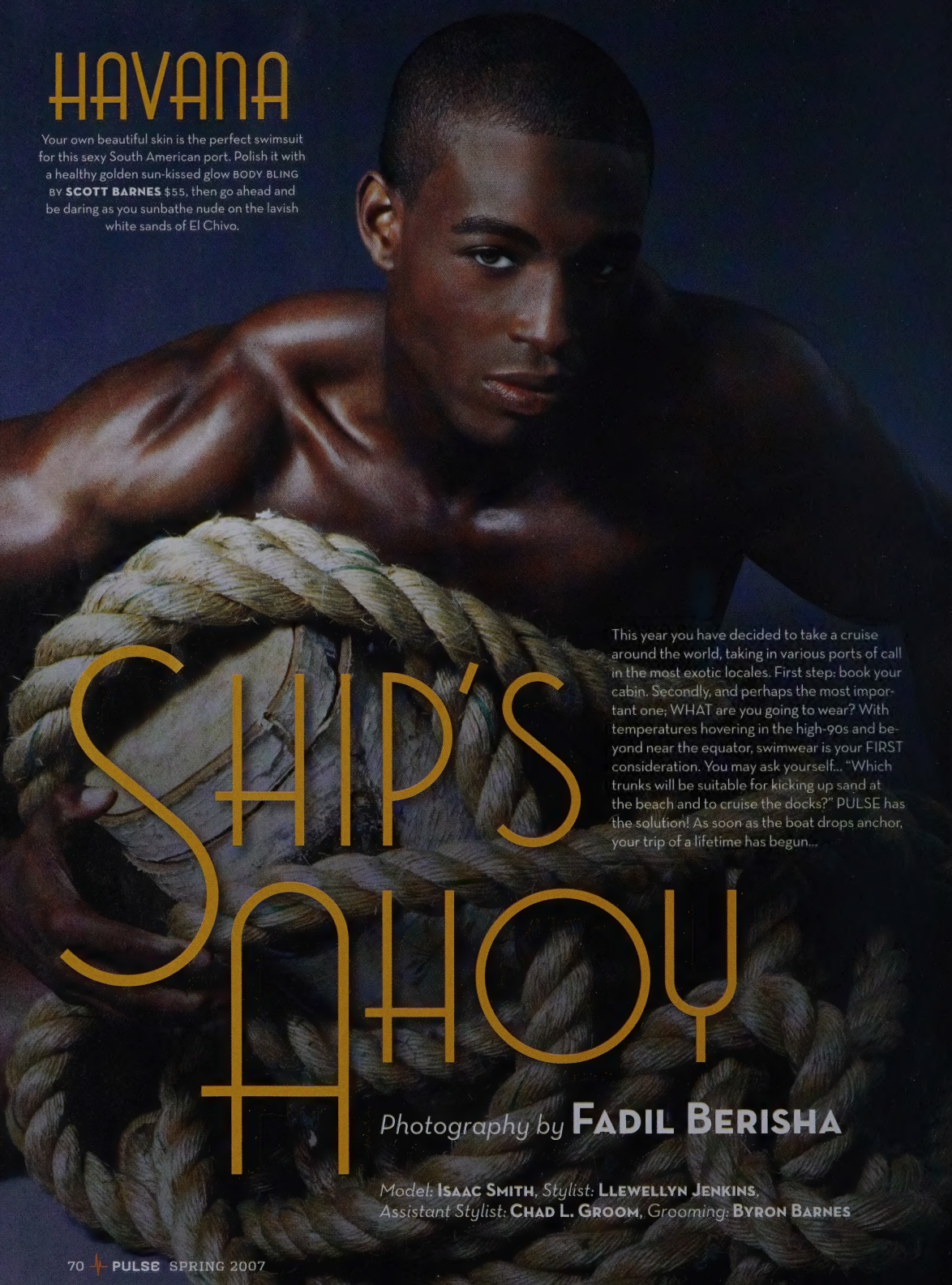
Hold Everything

A nice travel bag separates you from the fray; but this bright neon tote by *Piquadro $320* puts you in a class all your own. It's roomy enough to hold all of your personals, as well as an extra bathing suit, a bottle of water, and your favorite summer time novel. Trunks by *Watersport $40*

By the Numbers

A little SHADE never hurt anyone, especially between 11am and 3pm when the UV index is at its highest; but for added skin protection, treat yourself to a sunscreen product with an SPF (sun protection factor) of at least 15—the higher the number the greater the protection. Smooth on ***Bliss Ray of Hope SPF 20 $38***.

Yes, you may be melanin rich and believe that sunscreens are only for fairer skins, but after thirty minutes in the sun even the deepest skin tones are at risk for sun damage. To shield your sensitive eyes from the harsh glare of the sun, slip on a pair of ***Christian Dior, Sport 1 sunglasses $300***, with 100% UV protection to improve your sexy.



HAVANA

Your own beautiful skin is the perfect swimsuit for this sexy South American port. Polish it with a healthy golden sun-kissed glow BODY BLING BY **SCOTT BARNES** $55, then go ahead and be daring as you sunbathe nude on the lavish white sands of El Chivo.

SHIP'S AHOY

This year you have decided to take a cruise around the world, taking in various ports of call in the most exotic locales. First step: book your cabin. Secondly, and perhaps the most important one: WHAT are you going to wear? With temperatures hovering in the high-90s and beyond near the equator, swimwear is your FIRST consideration. You may ask yourself... "Which trunks will be suitable for kicking up sand at the beach and to cruise the docks?" PULSE has the solution! As soon as the boat drops anchor, your trip of a lifetime has begun...

Photography by **FADIL BERISHA**

Model: **ISAAC SMITH**, *Stylist:* **LLEWELLYN JENKINS**,
Assistant Stylist: **CHAD L. GROOM**, *Grooming:* **BYRON BARNES**

SAINT TROPEZ

Decidedly American style makes a big splash on the French Riviera.

TRACK JACKET $125 & TRUNK $75
BOTH BY **ANDREW NOWELL**
BUCKET HAT $30 & TOTE $75
BOTH BY **LESPORTSAC**
WATCH BY **KENNETH COLE** $125

MYKONOS
The Greek gods are smiling since you are the antithesis of the classic male form.
TRUNK $125 & SLEEVELESS HOODED SWEATSHIRT $300
BOTH BY VERSACE
Versace

BALI

Sparkling waters, balmy skies and bask in the intoxicating beauty that is Indonesia.

Trunk $125 & Head wrap $270
both by **Jean-Paul Gaultier**
Vintage Belt by **Elsa Peretti**
Tasseled Cashmere Robe
by **Loro Piana** $2,490
Super Shield Skin Saver SPF 30
by **Sephora SuperStars** $18

IBIZA

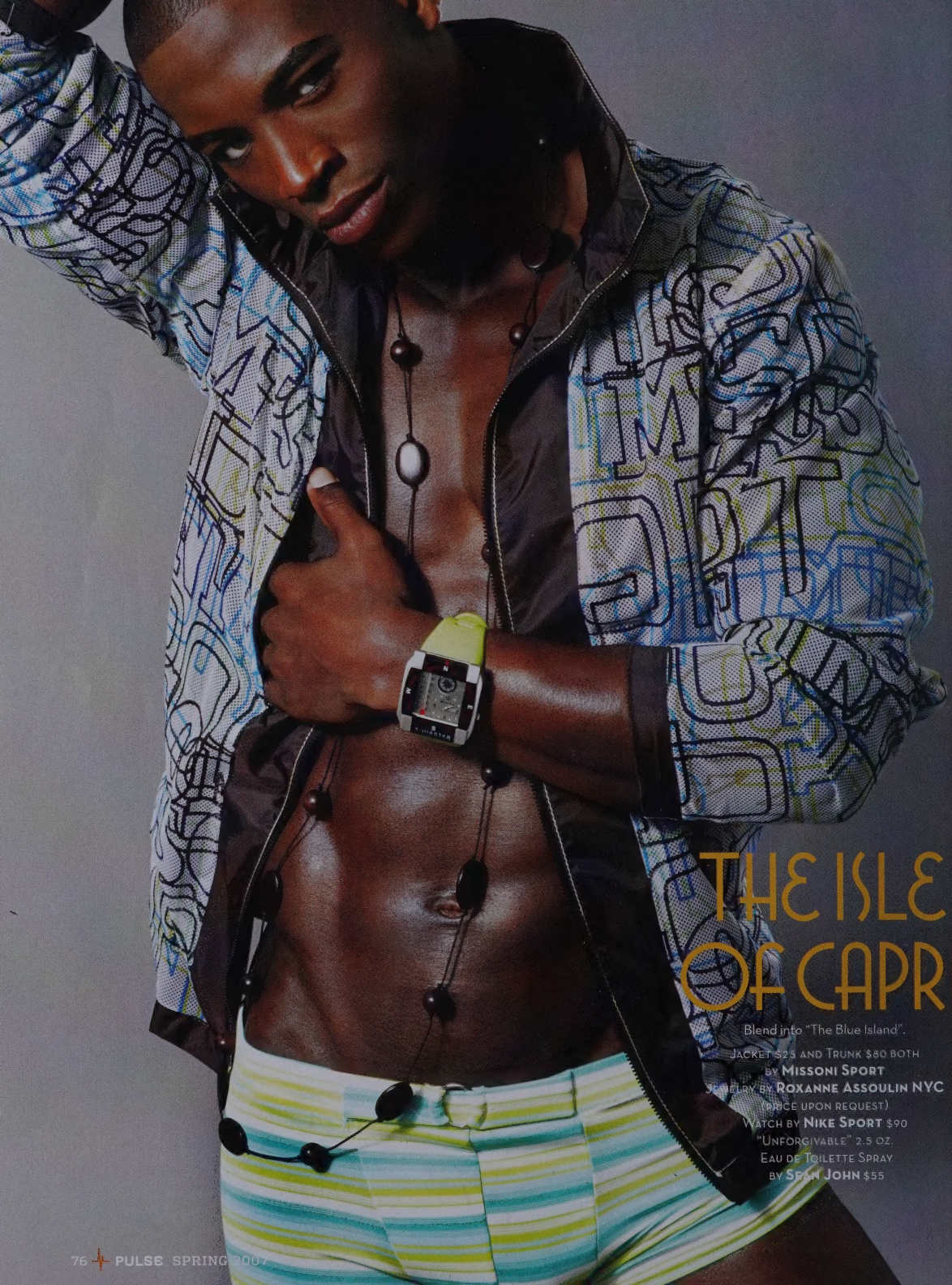
Before and after you hit the legendary clubs in Ibiza, frolic on the beach at Cala Bassa.

TRUNK BY **ROBERTO CAVALLI** $175
BRAZILIAN BRONZING SHEEN BY **BECCA** $26

FIJI ISLANDS

Sensual, sexy, and sensational... This gorgeous archipelago in the South Pacific is an aromatic dream. It is rich with the scents of sultry, warm driftwood and exotic floras. The newest fragrance by Michael Kors captures this essence with crisp fresh notes of mandarin, grapefruit peel, bergamot, juniper, rosemary, rosewood, and oak moss. It's simply summertime in a bottle.

"Island" 2.5 oz. Eau de Toilette
Spray by **Michael Kors** $52.50
Swim Trunks by **Michael Kors** $125



THE ISLE OF CAPR

Blend into "The Blue Island".

JACKET $25 AND TRUNK $80 BOTH
BY **MISSONI SPORT**
JEWELRY BY **ROXANNE ASSOULIN NYC**
(PRICE UPON REQUEST)
WATCH BY **NIKE SPORT** $90
"UNFORGIVABLE" 2.5 OZ.
EAU DE TOILETTE SPRAY
BY **SEAN JOHN** $55

ST. BARTHS

Gallivant around the French West Indies.

LOGO TRUNK BY **GUCCI** $180
TANK BY **HANRO OF SWITZERLAND** $39
ARMBAND BY **AMERICAN APPAREL** $7
SUPERSTAR SHOES BY **ADIDAS** $125
AVIATOR GLASSES BY **MODERN AMUSEMENT** $175
BASEBALL CAP BY **NEW ERA** $25
BAG BY **H&M** $5
NECKLACE BY **ALDO** $15

MONTE CARLO

The Monaco Grand Prix isn't the only thing that'll be racing once you hit Larvotto Beach.

Trunk by **Emilio Pucci** $130
Goggle by **Nike Sport** $20
Water of Choice **Evian**

SOUTH BEACH

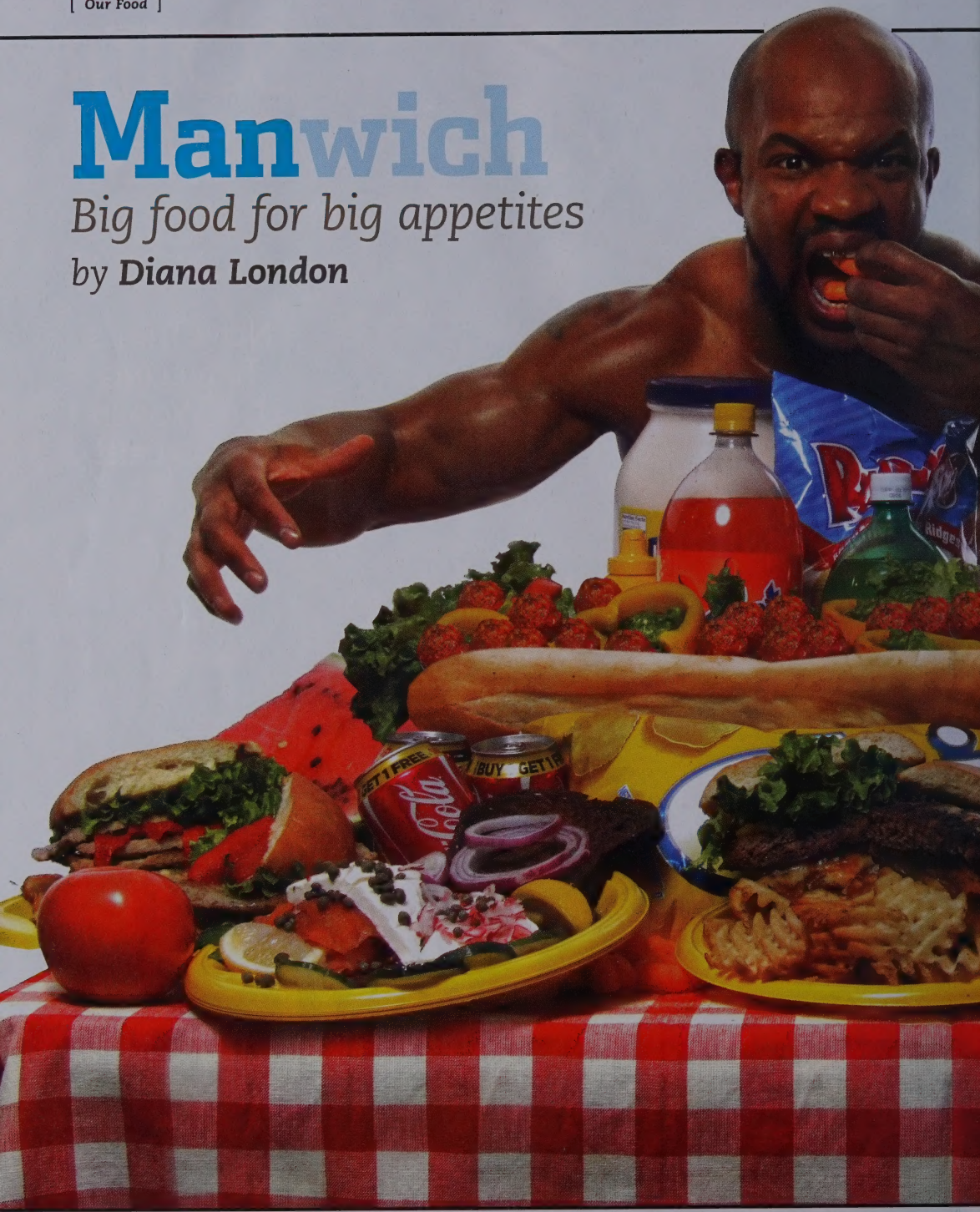
The warm tropical breezes of Miami welcome you home.
TRUNK BY **ARMAND BASI** $80
JEWELRY BY **KENNETH JAY LANE** (PRICE UPON REQUEST)

NOW THAT'S TRAVELING THE WORLD **IN STYLE!!!**

Manwich

Big food for big appetites

by **Diana London**



IT HAS BEEN SAID that the *expressway* to a man's heart is through his stomach. So, put your plan into overdrive. If you are a BIG hungry man or trying to feed one, then a fat juicy **MANWICH** is all the turbo power you'll need.

Stuff your face with supersized sandwiches piled high on hardy bread, with delicious meats, savory cheeses, grilled vegetables, all the fixins, and an ice-cold 2-liter Pepsi. Now, that's a meal!

Forget about low-carb intake, calorie counting, and fat ratios...*indulge your bulge* and enjoy. Don't worry; you'll slim down in time for swim suit season next year.

Jabbar's big man appetite is satisfied with these five supersized manwiches from ***Bar 89*** in New York City located at 89 Mercer Street. YES, without a doubt...BIGGER IS BETTER!

▶ Pork Chop II

Grilled in teriyaki sauce, topped with grilled onions, pecans, sliced green apples, and Bleu cheese dressing. Served on a toasted Italian roll with fries.

▶ S.S.S.

Scotland's finest thinly sliced, smoked salmon served open-face on dark rye with red onions, cream cheese, cornichons, and capers.

▶ Burger Las Brisas

Topped with melted Monterey Jack cheese, avocado, jalapeño peppers, lettuce, onions, and a bit of salsa sauce.

▶ The Cheeseburger

Topped with one or all of the following cheeses: American, Swiss, Colby, or aged white Cheddar.

▶ Country Cousin

Thinly sliced breast of chicken stacked on white or whole wheat toast, with avocado, sliced red onion, lettuce, bacon, and Hellmann's mayonnaise. Served with fries.

Photographed by **Tarrice Love**
Stylist: **Llewellyn Jenkins**
Assistant Stylist: **Chad L. Groom**
Grooming: **Douglas Snuggs**

TOSS MY SALAD

SUMMER IS THE SEASON when you think of vivid colors; flowers in bloom, succulent fruits and veggies, wholesome foods, and light comfy clothes. At this same time many people forgo paunch-producing power lunches and heavier comfort foods opting for lighter fare like delicious salads. Not only do they taste great, they're extremely healthy and more waistline friendly. Salads are a great way to showcase farm fresh produce and, although they may appear simple, each creation by nature blends nutrition in a complex array of the freshest, tastiest ingredients.

Salads need not be boring or a challenge. Fret not! You don't have to be a gourmet chef to make one perfect. Indeed, with a salad it's hard to go wrong since there's so much room for creativity and inventiveness. If your taste buds yearn for more flavor, just add a helping of your favorite this or that to the mix.

Visit your local farmers' market and let your imagination go wild over the range of vitamin-rich delights from good old Mother Earth. Savor aromas of ripened flesh-bearing fruits and fragrant fresh herbs wafting through the air to stimulate your culinary instincts. For that special touch, present your guests salads enhanced with edible flowers. Some favorites are chive blossoms, daisies, roses, and pansies. Their inclusion elevates a dish's visual appeal and adds to their tastes, if used sparingly. They're pretty to look at, but never too pretty to eat.

Try one of our recipes. Your friends will admire how well you've tossed their salad. Bon appétit!

Crab Romaine Salad

A tantalizing treat is crab romaine salad--a union of both land and sea. This mouthwatering, refreshing salad is a cool breeze to the taste buds that you and your friends will enjoy time and again this season.

1 head of Romaine lettuce, 1/8 cup black olives, 1 cup cherry tomatoes, 1 beet processed (slice to desired size), 1 cucumber, 1/2 green pepper, 1/2 red pepper, 1/2 red onion, 2 vine ripe tomatoes (slice to desired size), 1 cup King crab (slice to desired size), Salad dressing (optional)

Toss romaine, black olives, cherry tomatoes, sliced beets, and cucumbers in a large bowl. Then, add green pepper, red pepper, red onion, and sliced tomato on the top of the salad in a decorative array. If desired, complete your salad by adding your favorite salad dressing. Serves 4

Salad with Goat's Milk Yogurt Dressing

With two powerfully distinct flavors--peppery arugula and earthy goat's milk yogurt--enhanced by garlic, shallots, chives and pine nuts, this is a winner every time.

1/2 cup goat's milk yogurt, 1 teaspoon minced shallot, 1/4 teaspoon on minced garlic, Fine sea salt, Freshly ground white pepper, 1 1/2 teaspoon chives, thinly sliced, 2 large bunches of arugula, stems removed & thoroughly rinsed, 1/4 cup pine nuts, toasted & coarsely chopped.

In small bowl, whisk yogurt, shallot and garlic. Season with salt and pepper. Whisk in the chives. Cover and refrigerate (can be done earlier in the day). To serve, place the arugula and nuts in a large bowl. Lightly season to taste with salt and pepper. Add enough dressing to lightly coat the arugula, and toss. Serve immediately. Serves 4

Avocado & Papaya Salad with Sesame Dressing

This salad is an international summer sensation with an exotic mix of papaya, avocado, and sesame.

Toasted sesame seeds, 3 tablespoons granulated sugar, 1/2 teaspoon dry mustard, 1/4-1/2 teaspoon hot pepper sauce, 1/2 teaspoon paprika, 1/2 teaspoon Worcestershire sauce, 1 cup vegetable oil, 1/3 cup fresh lime juice, Salt to taste, Freshly ground black pepper to taste, 4 bunches of watercress, washed & stemmed, 2 ripe avocados peeled, pitted & sliced, 2 ripe papayas peeled, seeded, & sliced (rinse & keep half of seeds), 1 medium red onion peeled & sliced into thin rings

Whisk together first 10 ingredients in bowl, and reserve. Arrange a bed of watercress on a large serving platter. Alternate slices of avocado and papaya over watercress and scatter red onion and papaya seeds over all. Pour over reserved dressing, and serve. Serves 6 to 8.

Photographed by **Daniel Green**
Styled by **Lorenzo McCain**

Shira Leah $48

Daffy's $24

So you have the recipes, you've made the salads! Now, just make sure they're BEST DRESSED in one of these stunning bowls.

Pier 1 Imports $35

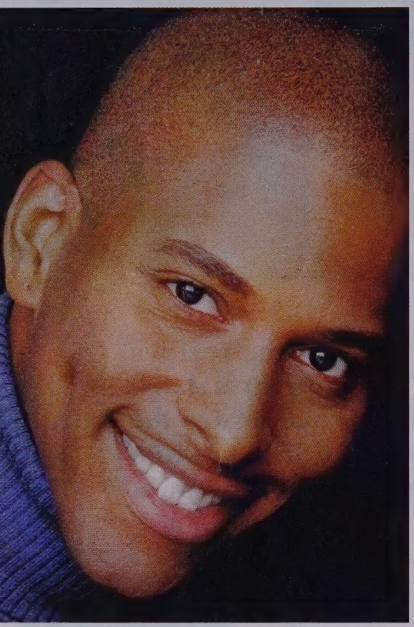
Daffy's $25

Pier 1 Imports $35

By Keith Boykin
(Nathan's Man!)

It's ALL About Nathan Williams

An interview with producer, promoter and entertainment attorney.



"Home is home. And, family is family. You have to know what's important and cultivate those gardens just as much as you cultivate your career."

WHEN PULSE MAGAZINE asked me to do this interview, I was stumped. I do interviews all the time, but I have never interviewed my own spouse. That's why I had to do this article about Nathan Hale Williams.

Nathan wears many hats. Some people know him as an event promoter in New York City, although more know him as a successful filmmaker. Quite a few people know him from his role as the evil bitch Byron in the film *The Ski Trip*, and still some remember him as my campaign manager in the 2004 Showtime television series *American Candidate*.

As an entertainment lawyer, Nathan has represented Billy Porter, Tammy Ford, Barbara Tucker, and many others. And he's interviewed Yolanda Adams, Patti Labelle, Monique, Chaka Khan, and others as a producer for his new reality show *Real Life Divas*.

So, which hat would he wear for this interview? I asked him to wear all of them. Nathan has boundless energy to match his boundless career. But as his partner, I get a sneak peek at the man behind the man. Today, I want to share a little bit of what goes on behind-the-scenes.

KEITH BOYKIN: *You went to Whitney Young High School in Chicago with a lot of other talented young black kids. How did that experience shape your future?*

NATHAN HALE WILLIAMS: I tell everyone who will listen how much I love my high school and the experience I had there. Whitney Young was a very special school. Not only was it the #1 ranked school in the city; it was also the only nationally ranked school that was predominantly black (66% at the time). Truly, it shaped my drive, work ethic, and discipline. I was surrounded by brilliant, overachieving black students and so, excellence really wasn't a choice. At my school, if you wanted to be noticed you had to be amazing. It really has stuck with me ever since then and I try to strive for excellence in everything I do. Go Dolphins!

KB: *You're a filmmaker, TV producer, entertainment lawyer, party promoter, writer, and so much more. How do you have time to do it all?*

NHW: The answer is I really don't know. I am always busy, but I like it that way. I am a very hyper person and sitting still drives me absolutely crazy. I think I have developed some mild case of A.D.D. Sometimes it gets to be really overwhelming, but I do have a good support system of friends and family that I call on to keep me centered. So, the basic answer is that I don't really have the time to do it all...I just keep going until I am at the verge of meltdown (sometimes after) and then, take a break...and do it all over again.

KB: *What was it like acting in the movie The Ski Trip?*

NHW: *The Ski Trip* was a ball. The cast was absolutely amazing. I mean, we didn't have anything. We ate bologna sandwiches and tater tots for lunch because that's all they had. Oh yeah, and really bad chili. But, it was so cool because we were all making our first movie. The actual character, Byron, was enormously gratifying to play. I got to play a bitch! However, it wasn't your average bitch...this bitch was the conscience of the film. I love the response I get from people when they first meet me and they've only known me as Byron. I always have to say, "I don't act like that." Well, not most of the time.

KB: *How do you balance your personal life with all that's going on in your career?*

NHW: Home is home. And, family is family. You have to know *(con't on page 87)*

Right now Jesse is fighting HIV.

REYATAZ, a protease inhibitor (PI) taken in HIV combination therapy*:

- **Can help raise your T-cells**
- **Can help lower your viral load to undetectable†**
- **Low chance of diarrhea** (shown in clinical trials)‡

*People who have taken anti-HIV medicines before usually take REYATAZ with ritonavir once daily as part of their HIV combination therapy.
† Undetectable is defined as a viral load of less than 400 or 50 copies/mL (depending on the test used).
‡ REYATAZ in combination therapy had a 1-3% rate of moderate-to-severe diarrhea.

REYATAZ does not cure HIV, a serious disease, or help prevent passing HIV to others.

REYATAZ®
(atazanavir sulfate) 200 mg/300 mg capsules

ASK YOUR DOCTOR if REYATAZ, in HIV combination therapy, can help you **fight HIV your way.**

REYATAZ® (atazanavir sulfate) Capsules

INDICATION: REYATAZ (atazanavir sulfate) is a prescription medicine used in combination with other medicines to treat people who are infected with the human immunodeficiency virus (HIV). REYATAZ has been studied in 48-week trials in both patients who have taken or have never taken anti-HIV medicines.

REYATAZ does not cure HIV or help prevent passing HIV to others.

IMPORTANT SAFETY INFORMATION:

Do not take REYATAZ if you are taking the following medicines: ergot medicines, Versed® (midazolam hydrochloride), Halcion® (triazolam), Orap® (pimozide), Propulsid® (cisapride), Camptosar® (irinotecan hydrochloride), Crixivan® (indinavir sulfate), Mevacor® (lovastatin), Zocor® (simvastatin), rifampin, St. John's wort (*Hypericum perforatum*), AcipHex® (rabeprazole sodium), Nexium® (esomeprazole magnesium), Prevacid® (lansoprazole), Prilosec® (omeprazole), or Protonix® (pantoprazole sodium). Do not use Viagra® (sildenafil citrate), Levitra® (vardenafil HCl), Cialis® (tadalafil), Vfend® (voriconazole), Advair® (fluticasone propionate and salmeterol inhalation powder), Flonase® (fluticasone propionate), or Flovent® (fluticasone propionate) while you are taking REYATAZ (atazanavir sulfate) without first speaking with your healthcare provider. **This list of medicines is not complete. Discuss all prescription and non-prescription medicines, vitamin and herbal supplements, or other health preparations you are taking or plan to take with your healthcare provider.**

Tell your healthcare provider right away if you have any side effects, symptoms, or conditions, including the following:

- **A change in the way your heart beats** may occur and could be a symptom of a heart problem.
- **Diabetes and high blood sugar** may occur in patients taking protease inhibitor medicines like REYATAZ.
- **Yellowing of the skin and/or eyes** may occur due to increases in bilirubin levels in the blood (bilirubin is made by the liver).
- **Rash** (redness and itching) sometimes occurs in patients taking REYATAZ, most often in the first few weeks after the medicine is started, and usually goes away within two weeks with no change in treatment.
- **If you have liver disease,** including hepatitis B or C, your liver disease may get worse when you take anti-HIV medicines like REYATAZ (atazanavir sulfate).
- **Kidney stones** have been reported in patients taking REYATAZ. Signs or symptoms of kidney stones include pain in your side, blood in your urine, and pain when you urinate.
- **Some patients with hemophilia** have increased bleeding problems with protease inhibitor medicines like REYATAZ.

Changes in body fat have been seen in some patients taking anti-HIV medicines. The cause and long-term effects are not known at this time.

Other side effects of REYATAZ taken with other anti-HIV medicines include: nausea, headache, stomach pain, vomiting, diarrhea, depression, fever, dizziness, trouble sleeping, numbness, and tingling or burning of hands or feet.

You should take REYATAZ once daily with food (a meal or snack). You should take REYATAZ and your other anti-HIV medicines exactly as instructed by your healthcare provider.

Please see Important Patient Information about REYATAZ on the next page.

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If you or someone you know needs help paying for medicine, call 1-888-4PPA-NOW (1-888-477-2669). Or go to www.pparx.org
Partnership for Prescription Assistance

PATIENT INFORMATION

℞ ONLY

REYATAZ® (RAY-ah-taz)

(generic name = **atazanavir sulfate**) **Capsules**

ALERT: Find out about medicines that should NOT be taken with REYATAZ (atazanavir sulfate). Read the section "What important information should I know about taking REYATAZ with other medicines?"

Read the Patient Information that comes with REYATAZ before you start using it and each time you get a refill. There may be new information. This leaflet provides a summary about REYATAZ and does not include everything there is to know about your medicine. This information does not take the place of talking with your healthcare provider about your medical condition or treatment.

What is REYATAZ?
REYATAZ is a prescription medicine used with other anti-HIV medicines to treat people who are infected with the human immunodeficiency virus (HIV). HIV is the virus that causes acquired immune deficiency syndrome (AIDS). REYATAZ is a type of anti-HIV medicine called a protease inhibitor. HIV infection destroys CD4+ (T) cells, which are important to the immune system. The immune system helps fight infection. After a large number of (T) cells are destroyed, AIDS develops. REYATAZ helps to block HIV protease, an enzyme that is needed for the HIV virus to multiply. REYATAZ may lower the amount of HIV in your blood, help your body keep its supply of CD4+ (T) cells, and reduce the risk of death and illness associated with HIV.

Does REYATAZ cure HIV or AIDS?
REYATAZ does not cure HIV infection or AIDS. At present there is no cure for HIV infection. People taking REYATAZ may still get opportunistic infections or other conditions that happen with HIV infection. Opportunistic infections are infections that develop because the immune system is weak. Some of these conditions are pneumonia, herpes virus infections, and *Mycobacterium avium* complex (MAC) infections. **It is very important that you see your healthcare provider regularly while taking REYATAZ.**

REYATAZ does not lower your chance of passing HIV to other people through sexual contact, sharing needles, or being exposed to your blood. For your health and the health of others, it is important to always practice safer sex by using a latex or polyurethane condom or other barrier to lower the chance of sexual contact with semen, vaginal secretions, or blood. Never use or share dirty needles.

Who should not take REYATAZ?
Do not take REYATAZ if you:
- **are taking certain medicines**. (See "What important information should I know about taking REYATAZ with other medicines?") Serious life-threatening side effects or death may happen. Before you take REYATAZ, tell your healthcare provider about all medicines you are taking or planning to take. These include other prescription and nonprescription medicines, vitamins, and herbal supplements.
- **are allergic to REYATAZ or to any of its ingredients.** The active ingredient is atazanavir sulfate. See the end of this leaflet for a complete list of ingredients in REYATAZ. Tell your healthcare provider if you think you have had an allergic reaction to any of these ingredients.

What should I tell my healthcare provider before I take REYATAZ?
Tell your healthcare provider:
- **if you are pregnant or planning to become pregnant**. It is not known if REYATAZ can harm your unborn baby. Pregnant women have experienced serious side effects when taking REYATAZ with other HIV medicines called nucleoside analogues. You and your healthcare provider will need to decide if REYATAZ is right for you. If you use REYATAZ while you are pregnant, talk to your healthcare provider about the Antiretroviral Pregnancy Registry.
- **if you are breast-feeding**. You should not breast-feed if you are HIV-positive because of the chance of passing HIV to your baby. Also, it is not known if REYATAZ can pass into your breast milk and if it can harm your baby. If you are a woman who has or will have a baby, talk with your healthcare provider about the best way to feed your baby.
- **if you have liver problems or are infected with the hepatitis B or C virus**. See "What are the possible side effects of REYATAZ?"
- **if you have diabetes**. See "What are the possible side effects of REYATAZ?"
- **if you have hemophilia**. See "What are the possible side effects of REYATAZ?"
- **About all the medicines you take** including prescription and nonprescription medicines, vitamins, and herbal supplements. Keep a list of your medicines with you to show your healthcare provider. For more information, see "What important information should I know about taking REYATAZ with other medicines?" and "Who should not take REYATAZ?" Some medicines can cause serious side effects if taken with REYATAZ.

How should I take REYATAZ?
- **Take REYATAZ once every day exactly as instructed by your healthcare provider**. Your healthcare provider will prescribe the amount of REYATAZ that is right for you.
  - For adults who have never taken anti-HIV medicines before, the usual dose is 400 mg (two 200-mg capsules) once daily taken with food.
  - For adults who have taken anti-HIV medicines in the past, the usual dose is 300 mg (one 300-mg capsule or two 150-mg capsules) plus 100 mg of NORVIR® (ritonavir) once daily taken with food.

  Your dose will depend on your liver function and on the other anti-HIV medicines that you are taking. REYATAZ is always used with other anti-HIV medicines. If you are taking REYATAZ with SUSTIVA® (efavirenz) or with VIREAD® (tenofovir disoproxil fumarate), you should also be taking NORVIR® (ritonavir).
- **Always take REYATAZ with food** (a meal or snack) to help it work better. Swallow the capsules whole. **Do not open the capsules**. Take REYATAZ at the same time each day.
- **If you are taking antacids or didanosine (VIDEX® or VIDEX® EC),** take REYATAZ 2 hours before or 1 hour after these medicines.
- **If you are taking medicines for indigestion, heartburn, or ulcers such as AXID® (nizatidine), PEPCID AC® (famotidine), TAGAMET® (cimetidine), or ZANTAC® (ranitidine),** talk to your healthcare provider.
- **Do not change your dose or stop taking REYATAZ without first talking with your healthcare provider**. It is important to stay under a healthcare provider's care while taking REYATAZ.
- **When your supply of REYATAZ starts to run low**, get more from your healthcare provider or pharmacy. It is important not to run out of REYATAZ. The amount of HIV in your blood may increase if the medicine is stopped for even a short time.
- **If you miss a dose of REYATAZ**, take it as soon as possible and then take your next scheduled dose at its regular time. If, however, it is within 6 hours of your next dose, do not take the missed dose. Wait and take the next dose at the regular time. Do not double the next dose. **it is important that you do not miss any doses of REYATAZ or your other anti-HIV medicines**.
- **If you take more than the prescribed dose of REYATAZ**, call your healthcare provider or poison control center right away.

Can children take REYATAZ?
REYATAZ has not been fully studied in children under 16 years of age. REYATAZ should not be used in babies under the age of 3 months.

What are the possible side effects of REYATAZ?
The following list of side effects is **not** complete. Report any new or continuing symptoms to your healthcare provider. If you have questions about side effects, ask your healthcare provider. Your healthcare provider may be able to help you manage these side effects.

The following side effects have been reported with REYATAZ:
- **rash** (redness and itching) sometimes occurs in patients taking REYATAZ, most often in the first few weeks after the medicine is started. Rashes usually go away within 2 weeks with no change in treatment. Tell your healthcare provider if rash occurs.
- **yellowing of the skin or eyes**. These effects may be due to increases in bilirubin levels in the blood (bilirubin is made by the liver). Call your healthcare provider if your skin or the white part of your eyes turn yellow. Although these effects may not be damaging to your liver, skin, or eyes, it is important to tell your healthcare provider promptly if they occur.
- **a change in the way your heart beats (heart rhythm change)**. Call your healthcare provider right away if you get dizzy or lightheaded. These could be symptoms of a heart problem.
- **diabetes and high blood sugar (hyperglycemia)** sometimes happen in patients taking protease inhibitor medicines like REYATAZ. Some patients had diabetes before taking protease inhibitors while others did not. Some patients may need changes in their diabetes medicine.
- **if you have liver disease** including hepatitis B or C, your liver disease may get worse when you take anti-HIV medicines like REYATAZ.
- **kidney stones** have been reported in patients taking REYATAZ (atazanavir sulfate). If you develop signs or symptoms of kidney stones (pain in your side, blood in your urine, pain when you urinate) tell your healthcare provider promptly.
- **some patients with hemophilia** have increased bleeding problems with protease inhibitors like REYATAZ.
- **changes in body fat**. These changes may include an increased amount of fat in the upper back and neck ("buffalo hump"), breast, and around the trunk. Loss of fat from the legs, arms, and face may also happen. The cause and long-term health effects of these conditions are not known at this time.

Other common side effects of REYATAZ taken with other anti-HIV medicines include nausea; headache; stomach pain; vomiting; diarrhea; depression; fever; dizziness; trouble sleeping; numbness, tingling, or burning of hands or feet; and muscle pain.

What important information should I know about taking REYATAZ with other medicines?
Do not take REYATAZ if you take the following medicines (not all brands may be listed; tell your healthcare provider about all the medicines you take). REYATAZ may cause serious, life-threatening side effects or death when used with these medicines.
- Ergot medicines: dihydroergotamine, ergonovine, ergotamine, and methylergonovine such as CAFERGOT®, MIGRANAL®, D.H.E. 45®, ergotrate maleate, METHERGINE®, and others (used for migraine headaches).
- HALCION® (triazolam, used for insomnia).
- VERSED® (midazolam, used for sedation).
- ORAP® (pimozide, used for Tourette's disorder).
- PROPULSID® (cisapride, used for certain stomach problems).

Do not take the following medicines with REYATAZ because of possible serious side effects:
- CAMPTOSAR® (irinotecan, used for cancer).
- CRIXIVAN® (indinavir, used for HIV infection). Both REYATAZ and CRIXIVAN sometimes cause increased levels of bilirubin in the blood.
- Cholesterol-lowering medicines MEVACOR® (lovastatin) or ZOCOR® (simvastatin).

Do not take the following medicines with REYATAZ because they may lower the amount of REYATAZ in your blood. This may lead to an increased HIV viral load. Resistance to REYATAZ or cross-resistance to other HIV medicines may develop:
- Rifampin (also known as RIMACTANE®, RIFADIN®, RIFATER®, or RIFAMATE®, used for tuberculosis).
- St. John's wort (*Hypericum perforatum*), an herbal product sold as a dietary supplement, or products containing St. John's wort.
- "Proton-pump inhibitors" used for indigestion, heartburn, or ulcers such as AcipHex® (rabeprazole), NEXIUM® (esomeprazole), PREVACID® (lansoprazole), PRILOSEC® (omeprazole), or PROTONIX® (pantoprazole).

Do not take the following medicine if you are taking REYATAZ and NORVIR® together.
- VFEND® (voriconazole).

The following medicines may require your healthcare provider to monitor your therapy more closely:
- CIALIS® (tadalafil), LEVITRA® (vardenafil), or VIAGRA® (sildenafil). REYATAZ may increase the chances of serious side effects that can happen with CIALIS, LEVITRA, or VIAGRA. Do not use CIALIS, LEVITRA, or VIAGRA while you are taking REYATAZ unless your healthcare provider tells you it is okay.
- LIPITOR® (atorvastatin). There is an increased chance of serious side effects if you take REYATAZ with this cholesterol-lowering medicine.
- Medicines for abnormal heart rhythm: CORDARONE® (amiodarone), lidocaine, quinidine (also known as CARDIOQUIN®, QUINIDEX®, and others).
- VASCOR® (bepridil, used for chest pain).
- COUMADIN® (warfarin).
- Tricyclic antidepressants such as ELAVIL® (amitriptyline), NORPRAMIN® (desipramine), SINEQUAN® (doxepin), SURMONTIL® (trimipramine), TOFRANIL® (imipramine), or VIVACTIL® (protriptyline).
- Medicines to prevent organ transplant rejection: SANDIMMUNE® or NEORAL® (cyclosporin), RAPAMUNE® (sirolimus), or PROGRAF® (tacrolimus).
- The antidepressant trazodone (DESYREL® and others).
- Fluticasone propionate (ADVAIR®, FLONASE®, FLOVENT®), given by nose or inhaled to treat allergic symptoms or asthma. Your doctor may choose not to keep you on fluticasone, especially if you are also taking NORVIR®.

The following medicines may require a change in the dose or dose schedule of either REYATAZ or the other medicine:
- FORTOVASE®, INVIRASE® (saquinavir).
- NORVIR® (ritonavir).
- SUSTIVA® (efavirenz).
- Antacids or buffered medicines.
- VIDEX® (didanosine).
- VIREAD® (tenofovir disoproxil fumarate).
- MYCOBUTIN® (rifabutin).
- Calcium channel blockers such as CARDIZEM® or TIAZAC® (diltiazem), COVERA-HS® or ISOPTIN SR® (verapamil), and others.
- BIAXIN® (clarithromycin).
- Medicines for indigestion, heartburn, or ulcers such as AXID® (nizatidine), PEPCID AC® (famotidine), TAGAMET® (cimetidine), or ZANTAC® (ranitidine).

Women who use birth control pills or "the patch" should choose a different kind of contraception. REYATAZ may affect the safety and effectiveness of birth control pills or the patch. Talk to your healthcare provider about choosing an effective contraceptive.

Remember:
1. **Know all the medicines you take.**
2. **Tell your healthcare provider about all the medicines you take.**
3. **Do not start a new medicine without talking to your healthcare provider.**

How should I store REYATAZ?
- Store REYATAZ Capsules at room temperature, 59° to 86° F (15° to 30° C). Do **not** store this medicine in a damp place such as a bathroom medicine cabinet or near the kitchen sink.
- Keep your medicine in a tightly closed container.
- Throw away REYATAZ when it is outdated or no longer needed by flushing it down the toilet or pouring it down the sink.

General information about REYATAZ
This medicine was prescribed for your particular condition. Do not use REYATAZ for another condition. Do not give REYATAZ to other people, even if they have the same symptoms you have. It may harm them. **Keep REYATAZ and all medicines out of the reach of children and pets**.

This summary does not include everything there is to know about REYATAZ. Medicines are sometimes prescribed for conditions that are not mentioned in patient information leaflets. Remember no written summary can replace careful discussion with your healthcare provider. If you would like more information, talk with your healthcare provider or you can call 1-800-321-1335.

What are the ingredients in REYATAZ?
Active Ingredient: atazanavir sulfate
Inactive Ingredients: Crospovidone, lactose monohydrate (milk sugar), magnesium stearate, gelatin, FD&C Blue #2, titanium dioxide, black iron oxide, red iron oxide, and yellow iron oxide.

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Bristol-Myers Squibb Company
Princeton, NJ 08543 U.S.A.

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what's important and cultivate those gardens just as much as you cultivate your career. I do just that...balance. It can be difficult since I keep a home office and so does my partner, but we have set up things to make sure we spend quality time away from the computer and the telephone. We go out on dates every Friday and we have our "family shows" (*American Idol*, *Desperate Housewives*, and *Lost & Heroes*). With my friends, I just try to spend as much time with them that I can outside of being "Nathan Hale." We kick it, chill, and have a good time. Really, without those moments I would go crazy.

KB: ***As you know, I am from St. Louis. Which is better, Chicago or St. Louis?***

NHW: Which is better a Maserati or a Mazda? Ask me a real question dammit! *(laughs)*

KB: ***I know your mom is an important influence on your life. What advice has she given that has been helpful to your development?***

NHW: My mother has given me TONS of excellent advice. So much so that I told her she needs to write a book. The best pieces of advice she has given me are: 1) surround yourself with people who you want to be like and who are positive, hard working, and dedicated; 2) have integrity in everything you do; and 3) always strive to be your best with the goal of being THE best!

KB: ***Where do you want to be five years from now?***

NHW: Happy and doing more of the same. Making movies and TV shows that touch people and make them feel good about themselves, humanity, and the future. Oh yeah, and I want some babies.

KB: ***Okay, we'll talk about that later. Why is most of your programming geared towards minority audiences?***

NHW: Because we need it. We need more programming that doesn't play to the lowest common denominator. And, I always say you have to start with your base and then expand. If you always remember your base you'll be just fine.

KB: ***What producers do you look up to? And who are some of your other influences?***

NHW: Lee Daniels was the first black gay man I ever knew to be a producer. I remember seeing him on the cover of *Venus* magazine *(I think)* and thinking, I want to do that. I want to make films with Halle Berry that win Oscars. And yes, I want to be out and doing it.

I look up to my mom. I look up to you... My friends. I have been very fortunate to be surrounded by the most positive and intelligent people in the world. I don't have to look far for positive influences and it's a tremendous blessing.

KB: ***Your film Dirty Laundry is coming out this year. Are you excited about it and what should we expect?***

NHW: Excited is an understatement. Excited, anxious, crazy...you name it...I feel it. It's like having a child. I have seen and love the child, but now the rest of the world gets to see it. They better think my baby is cute. In all seriousness, I am just ready for it to be here. I expect it to have a huge impact. And hopefully, make a shit-load of money.

KB: ***What advice would you give to an aspiring filmmaker?***

NHW: Get educated! In whatever field you want to be in, get educated. Have integrity. And believe in the impossible. I always say that moviemaking is magic and madness. You have to believe in magic to make movies. But, you also have to be educated so you can deal with the madness.

KB: ***What do you like doing for fun?***

NHW: Traveling. Eating. Drinking. Playing with my friends.

KB: ***Tell me something that people don't know about you that might surprise them?***

NHW: I like to be home. When I am in my house, I hate to leave. I really do... especially to parties. When you have to do it for a living it is far less attractive to you. I much prefer to stay at home and watch the boob tube or work.

KB: ***How did you meet that hot guy you've been involved with for the past five years?***

NHW: He stalked me in the gym. We got him some psychiatric help and, then, we started dating *(laughs)*. We met in the gym. I fell in love on our first date and I have been in love ever since.

KB: ***Ah, that's so nice. I feel the same way. So, how important are relationships and friendships to you?***

NHW: The most important things to me are my family and my friends. And, I know a lot of people say that, but for me, it's true. I always want them to be around me. I am very blessed to be loved and I want to return those blessings to the ones who give them to me.

KB: ***What's the next project you're working on?***

NHW: Whew! My producing partner, Crystal McCrary Anthony, and I are working on a lot right now. We just started a second season of *Real Life Divas*. I am finishing a script called *All The Women I've Loved* based on the novel of the same name by Byron Harmon. We're probably going to shoot that next spring. We're also working on the feature films, *Homecourt Advantage* and *AG*, and producing a television movie called *Passing*. Finally, we have three TV shows in development: *Harlem*, *Swans*, and *Generation G*. We're what we call "stupid busy." I would also love to work with Eva again, so I am trying to think of something we can do together.

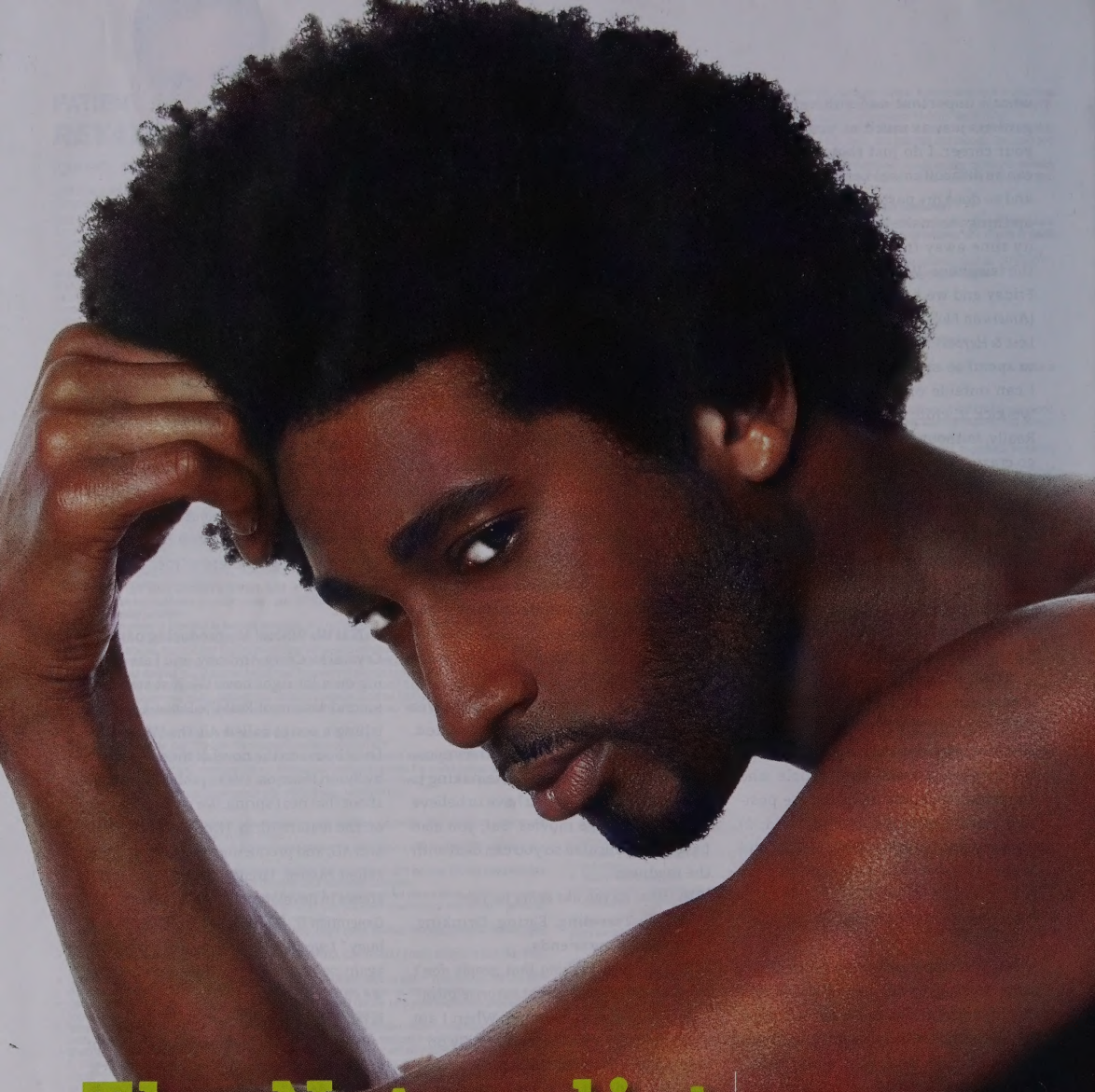
KB: ***What's your life's motto?***

NHW: I have several: 1) Be excellent and fair! 2) "If opportunity doesn't knock, build a door!" – Milton Berle. 3) "Just do it!" – Nike. And, 4) "In life you must be tough and tender. If you're not tough, you'll never get anywhere. If you're not tender, you'll never stay there!" – Maya Angelou.

KB: ***Well, I love what you're doing baby, and I love you, too. Thanks for doing the interview.***

NHW: Thank you, baby.

Keith Boykin is a best-selling author, political activist and co-host of BET's **My Two Cents**.



The Naturalist

HAIR

A MAJESTIC AFRO, a lush tangle of dreads, and sleek cornrows are celebrations of our resilient "*hair-itage*." Natural Hair is an expression of one's personality and sense of style, and for maintaining its beauty; there are a harvest of new products infused with natural ingredients. Whatever your *coif* of choice, nourish your mane with a balanced diet of magnanimous ingredients like shea butter, avocado, coconut, olive, cactus oil, sage, mayonnaise, rosemary, carrot oil, and egg. These are some of nature's best that bestow a bumper crop of rich vitamins and antioxidants. Couple luster with a clean, inviting fragrance and you'll earn a slot on everyone's best *tressed* lists.

by Zulekha Haywood

NATURE'S BEST:

Cantu: *Shea Butter After Shampoo Rinse Out Conditioner, 13.5 oz. $4,* ***Vigorol:*** *Olive Oil Deep Moisture Treatment & Hairdress, 7 oz., $6,* ***Carol's Daughter:*** *Tui Hair Oil, 2 oz., $8,* ***Hollywood Beauty:*** *Carrot Oil Root Moisturizer Hair Lotion, 12 oz. $3,* ***Rasta Locks Twist:*** *Jamaican Mango & Lime Cactus Oil Serum, 4 oz. $5.50*

SKIN IF IT'S WHOLESOME for your body, more than likely, it'll be equally good to your skin! But going green need not be expensive. Stretch your diet and dollar by incorporating some organic finds into your skincare regimen. Mix honey, almonds, sea salt, and oatmeal in a blender and slough off dead skin cells and city toxins. All skin types can enjoy the benefit of a 10-minute egg white mask to tighten pores, and fish oil from caviar has been proven to deter acne flare-ups. Use mayonnaise as an ideal scalp moisturizer, and try a sprig of mint for fresh breath all day. And, remember to soothe those tired puffy bloodshot eyes with a cooling slice of cucumber. So, experiment with what's in your kitchen to reveal your good looks, naturally.

Photos by Tarrice Love
Hair Model: William Elliot Springfield
Skin Model: Sammi

Fit 4 Life:

PULSE Guide to Fitness and Health

Tips from **Ulisses Jr.**, *New York-based ACE and AFAA certified celebrity fitness trainer and Musclemania® Superbody Pro Champion.*

Going Broad: Sculpting the Perfect Shoulders

First, thanks to all of our readers for their letters and emails in response to the last issue's feature on abs. I am very excited that you have chosen a healthier attitude towards achieving your fitness goals.

Last time, we were on the mat tightening our abdominal muscles, to reveal that sometimes elusive part of the anatomy, the six-pack. This time, we will focus on one of the body's smaller and often neglected muscle groups, the shoulders. Nice toned shoulders look awesome and can give your architecture the illusion of broadness. For instance, a broad pair of shoulders will make a guy with a wide waistline look slim-waisted. For those with a big butt, broad shoulders can help dramatically improve body proportions by creating balance between the upper and lower torso.

The shoulder is comprised of three muscle areas that work in unison: the front, side, and rear deltoids. To achieve a well-balanced, symmetrical pair of shoulders, it is essential that you train all three areas. Any shoulder exercise that involves a pressing motion would work all three, while raises and rowing exercises work one or the other. As with any workout regimen, when you train your shoulders, it is important that you pay attention to your form and perform each exercise correctly. Heavy weights using bad form can cause injury and probably will not give you the results you desire. Shoulders involve a complex network of bones, tendons, muscles, and cartilage and can be very fragile. Consequently, I strongly recommend that when doing any pressing exercises for your shoulders, that you stabilize your back against a pad.

Use either cables or free weights (dumbbells or a barbell) to train your shoulders. Cables allow you to maintain constant resistance on the muscles throughout the whole range of motion, while with free weights, the resistance changes as you move through the exercise. Neither one is better than the other, but to ensure that your muscles are challenged and stimulated, it is a good idea to mix both styles whenever you train.

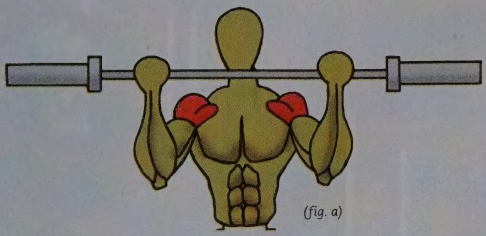
For each exercise, do 3 sets of 12 repetitions, with 30 seconds rest between each set.

For more info about Ulisses, check out ulissesjr.com. For his up coming appearances at your local Pride Event go to gmad.org.

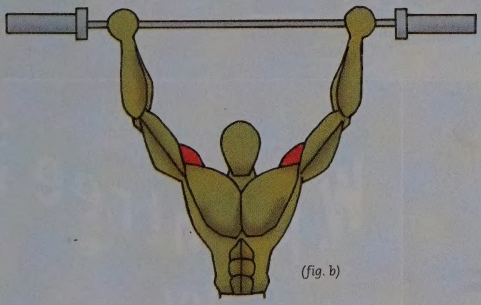
Healthy Tips

- Train hard and train smart, shoulders involve a few joint muscles which can easily cause injuries if trained incorrectly. Improper training can lead to neck and back pains.
- Use proper form with moderate weight; remember that you are trying to sculpt your shoulders so keep your reps high.
- Stay dedicated to your workouts.
- Keep your water intake high and maintain a good diet.

Photo by John Labbe Illustrations by Zuberi Zahur



(fig. a)



(fig. b)

FRONT MILITARY PRESS

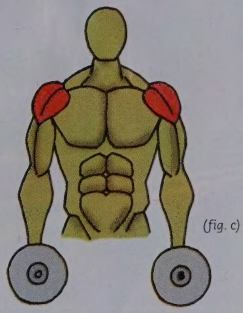
Target muscle: front, side, and rear deltoids

Sit on a low back bench with your feet flat on the floor and your back firmly against the back rest. Grab the barbell with palms facing forward, hands shoulder-width apart. Lift the bar off its rest and over your head. Slowly lower the bar in front of your face until your hands are just above shoulder height, inhaling as you do so (fig. a). Exhale as you slowly press the bar back over your head until your arms are fully extended, but make sure your elbows do not locked (fig. b).

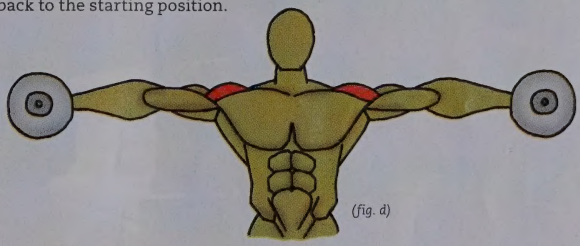
SIDE RAISES

(Target muscle: side deltoids)

Hold two dumbbells next to your thighs with your palms facing each other. Keep your elbows slightly bent. Stand with your feet shoulder-width apart and slightly bent (fig. c). Inhale as you slowly lift both dumbbells directly out to your sides until your elbows are at shoulder height. Your palms should be facing down at this point (fig. d). Exhale as you slowly lower the dumbbells back to the starting position.



(fig. c)



(fig. d)

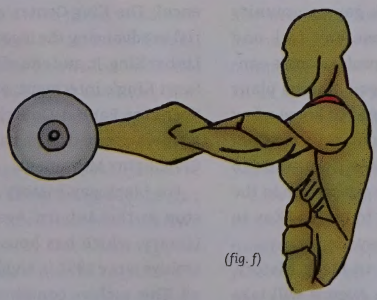
SHRUGS

(Target muscle: trapezoids)

Your trapezoid muscles connect your upper back and shoulders so you can train them with either shoulder or back workouts. I recommend you train them with shoulders because back is a much bigger muscle group and it will save you time in the gym on back days.

Take two dumbbells and hold them at arms length along your side, move your shoulders up and down in a straight motion. When shrugging, you should try to make your shoulders touch your ears and always squeeze at the top when you contract the muscle.

(fig. e)

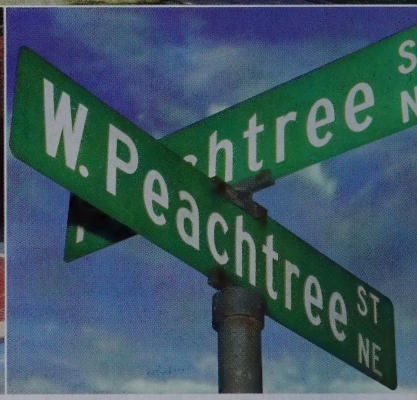


(fig. f)

FRONT RAISES

(Target muscle: front deltoids)

Grab dumbbells in both hands, making sure that you can comfortably raise the weight without discomfort or straining. With your back straight, shoulders rotated backwards, and knees slightly bent, stand with feet shoulder-width apart (fig. e). Inhale as you slowly lift one arm until the dumbbell is at eye level (fig. f). Exhale as you slowly lower the dumbbell to the starting position. Alternate the exercise with the other arm until you have completed a set.



KEY TO THE SOUTH

Atlanta AMERICA'S BLACK GAY MECCA

By Kevin E. Bynes

ATLANTA is without a doubt one of the hottest destinations for black gay men. While widely known because of its eminently famous Black Gay Pride, Atlanta is fast becoming the place to be year round. From New York and D.C. to Miami, Chicago, and California, gay men are converging on Atlanta in amazing numbers.

Even the Tom Joyner Morning Show recently referred to Atlanta as one of the gayest spots in America. The nightlife is jumping, the black gay community has a small town close-knit feel, and the climate for black professionals continues to thrive. Are you making plans to visit? Well, you'll need to know a few things about this amazing city that not only publicly welcomes thousands to the largest black pride celebration in the world, but is proving to be the "Key to The South" for black gay men.

Atlanta is steeped in black history. A drive down Auburn Avenue will take you past the Apex Museum, where every month is Black History Month with "The African American Panoramic Experience"; The King Center, a living memorial to advancing the legacy of Dr. Martin Luther King, Jr. and site of his and Coretta Scott King's interment; and the historic Ebenezer Baptist Church, home to Dr. King who served as its pastor during the Civil Rights Movement.

For black gay history aficionados, a stop at the Auburn Avenue Research Library, which has housed a black gay archive since 1997, is highly recommended. This archive contains much literary

history, including some rare and hard to find works. While on Auburn Avenue, why not stop at Negril, Atlanta's best Caribbean restaurant, where the brown-stewed fish and homemade sorrel are divine.

For an equally historic jaunt, take a walk down Peachtree Street, on which several sign posts mark famous civil war battles such as the Battle of Peachtree Creek of 1864, from which it gets its name. In the early 20th century, 66 Peachtree Street was the former location of the Crystal Palace, a barber shop whose owner is credited with laying the foundation for Atlanta's black middle class. A former slave, Alonzo Herndon, parlayed his hair cutting skills into the finest men's barbershop in Georgia. The Crystal Palace catered to white businessmen until it was badly damaged during Atlanta's 1906 race riots. With three successful barbershops, Herndon became one of Atlanta's wealthiest men, its first Black millionaire, and founded the Atlanta Mutual Insurance Association, later renamed Atlanta Life Insurance Company. The "Herndon Home" is a landmark listed in the National Register of Historic Places and a museum of Atlanta's black history that can be toured for a modest admission of $5.

Peachtree Street is also home to some of the city's most fabulous restaurants, hotels, bars, and clubs. A personal favorite, Mick's, a southern-styled bar and grill, offers a variety of down-home and Creole dishes in a casual atmosphere. With two locations in Midtown and one in Buckhead, Mick's gives you three opportunities to check out their trademark fried green tomatoes. And no Atlanta vacation is complete without a taste of Georgia's fried green tomatoes.

Before you leave Peachtree Street, check out what's known as Atlanta's "Black Gay Starbucks." It owes its popularity to seating along the huge street side window located at 7th and Peachtree. From this vantage point, casually observe shoppers, guys filing into Bulldogs (gay bar), and street trade headed to Atlanta's stroll located nearby. Once claiming your window seat, you'll soon be engrossed in conversation with a group of new friends. Afterwards, you can walk less than a block to eateries like Gordon Biersch (brewery restaurant), The Vortex (bar & grill), Noodle (trendy Pan-Asian) or Little Azio (brick-oven pizza & pasta) before hitting the dance floor at Bulldogs, whose back porch hosts some of the world's most competitive card games.

Shopper's delight in Lenox Square and Phipps Plaza, two of Atlanta's most upscale malls that are only a transit ride away from Peachtree Street. (MARTA offers both per-ride fares @ $1.75 and unlimited fares @ $13 per week). Located directly across from each other, these malls host just about every fashion retailer any discriminating fashionista needs to make their vacation complete. Bloomingdale's and Neiman Marcus at Lenox and Parisians and Nordstrom at Phipps are accompanied by a host of high-fashion boutiques including Armani, Burberry, Cartier, Gucci, Hermès, Versace, and Louis Vuitton.

But, Atlanta offers even more. At Lenox Square on Saturdays, you'll notice fewer kids shopping than you'll see hanging out, meeting up, and cruising. Most of them are getting their nightclubbing drag together at Filene's Basement right across the street, prior to sauntering over to Lenox Square to hang out. On Sunday afternoons, the masses come from all over the state to descend upon Piedmont Park to chill, fire up the grill, play volleyball, and take in the eye candy of the hotties flaunting body by Bally, while a younger group is "J-setting" in the park.

Popularized in the south, J-setting evolved from the antics of the "Prancing J-settes," a dance group formed in 1997 that escorted the Jackson State University marching band. This syncopated, spontaneously-choreographed form of competitive team dancing includes high kicks, splits, and feminized drum major antics all made up on the spot, a thrill to watch, and guaranteed to overwhelm you with excitement.

Lest we forget, the stories about hot clubs like Traxx, Loretta's, The Marquette, and recently Fusions where patrons show up "dressed to sweat" and party until dawn are legendary. Today, although more kids are dressed to impress, the party still goes on all week. With promoters competing to have the strongest drinks, best DJs, sexiest strippers, and hottest clientele, "the boyz" bounce from club to club. They are found on Sundays at Chaparral, shaking off the last of the weekend; Mondays at Jungle, enjoying the best of glam drag shows; at Atlanta Live on Tuesdays, The Mark on Wednesdays, Bulldogs on Thursdays, and usher in the weekend on Fridays at Club 708 where the ballroom kids hold court, while Towers II reigns for a mature crowd. And on Saturdays, it's back to Atlanta Live.

"...Atlanta as one of the gayest spots in America. The nightlife is jumping, the black gay community has a small town close-knit feel, and the climate for black professionals continues to thrive. Are you making plans to visit?"

Few other cities provide the down-home feeling, rich cultural and political history, professional opportunities, and trendy urban lifestyle that many black gay men treasure. Atlanta provides all of these things and more. So remember, when you visit Atlanta, after you comb the racks at Lenox and Phipps, reconnect with culture at Apex, get your party on at Atlanta Live, peep the eye candy at Piedmont Park, and down a good-sized helping of fried green tomatoes at Mick's, stop by Starbucks, and tell everyone I said "Hey!"

strategy for avoiding victimization or to guarantee protection. This approach is not without its risks.

"An out queen came in thirsty. They kept telling her to choose a man, but she was too thirsty to choose. She liked my man, so he and his boys lured her to a secluded part of the institution and while she was in the act, men started coming out of stairwells and locker rooms. They ran a train on her. After that she went into protective custody afraid for her life." recalls Keith. While the gang rape described is clear, determining what qualifies as consensual sex versus rape in a prison's intimidation laden context is murky.

Set ups that coerce victims into sex under the threat of violence are common. In some cases, "wolves" or protectors loan drugs, money, cigarettes, and other luxuries to indebt an inmate and create an obligation into having sex or even turning tricks as a payoff. Other regular scenarios include that of a protector "rescuing" an inmate from gang rape, in which the protector secretly orchestrates this with a group of cronies. Sexual slavery exist where "pimping" inmates for as little as $3 and "selling" inmates for up to $500 has been reported in some systems. And, finally, there is the practice of protectors assuming automatic ownership of their "wife's" property, requiring her to handle domestic chores and provide on-demand sexual services for the protector's gang. This is usually viewed by administrators as a consensual experience for gays or "turned out" victims.

Coercion also comes in the form of forcing openly gay men to choose a lover while in prison, a previously uncommon practice. Where relationships are consensual, there is no control over the length of time bonds will last, even as cellmates. A partner can be transferred or put in solitary confinement. Before you know it, there is a new cellmate disrupting your safe haven, and possibly threatening your life.

Like rape, sex isn't inevitable in prison. The overwhelming majority of incarcerated men do not engage in same-sex activities. Most who do (often just for sexual release) identify as heterosexual. Some considering themselves on the DL (down-low) will hide any activity from their buddies by deflecting attention with taunting transgender and openly gay men. Some gays also choose to avoid sex while in prison for safety reasons.

While violence, rape, and assaults are not the only threats to one's survival in prison, navigating the challenge of maintaining your mental and physical health can be just as treacherous. "You have to go in there and tell yourself this is going to be your home and mentally prepare yourself to deal with it," Rico exclaimed. "I tried to do the same thing every day; it helped the time go faster. If you let the time 'do you,' you'll go crazy." Then there are concerns about sexual health.

In state and federal prisons, 50 out of every 10,000 inmates are HIV-positive, making HIV rates for those incarcerated three times higher than the national average. With only two state prison systems in Vermont and Mississippi and five city jails (Philadelphia, New York City, Los Angeles, San Francisco and the District of Columbia) making condoms available for male inmates, the outlook for uninfected inmates staying negative isn't promising. Even if you manage to escape rape, avoiding HIV can be more than a notion. "People would try to find ways to protect themselves with plastic wrap from the kitchen, but, generally, they didn't protect themselves because they did not care." says Rico.

If one manages to survive the maze of confinement alive and relatively unscathed, a new challenge awaits. Society has a long unforgiving memory of criminal convictions and this landscape can be equally difficult to maneuver after completing time in prison. Of the 700,000 inmates to be released in 2007, the U.S. Department of Justice estimates that approximately 70% of them will return to prison within three years.

There are few guides available to prepare anyone for a stint in prison. However, it would be the ultimate "survival of the fittest" reality show. The HBO prison drama Oz may have given us outsiders a peak and a tome for institutional survival, but it isn't really how the game is. While Oz had authenticity in its depictions of the made-for-television testosterone-driven series, there is little that is sexy about actual prison isolation, doing hard time, and its mind-numbing routine. Multiple viewings of Adebisi and Beecher won't come close to preparing anyone for the long stretches of idle time, painful rejection of collect calls, stress of threatened violence, or the lustful eyes that offer chills instead of thrills. Like Oz, it appears the best way to survive prison drama is to never get cast in its lockdown at all.

"WHILE VIOLENCE, RAPE, AND ASSAULTS ARE NOT THE ONLY THREATS TO ONE'S SURVIVAL IN PRISON, NAVIGATING THE CHALLENGE OF MAINTAINING YOUR MENTAL AND PHYSICAL HEALTH CAN BE JUST AS TREACHEROUS."

Advertisement

Building Community

Up Close with ITLA, producers of Atlanta Black Pride—the world's largest Black Pride festival

In The Life Atlanta, Inc. has grown from a small network of friends who would host an annual park picnic into the world's largest Black Gay Pride festival since formally organizing more than 11 years ago.

Today, its annual Pride festival attracts more than 60,000 guests and visitors, offering an array of educational seminars, advocacy outreach opportunities, and stellar entertainment events that showcase the Black gay and same-gender-loving experience at its best.

Through its year-round programs ITLA is one of Black Gay America's crown jewels, working to celebrate, affirm and promote pride, unity and self-empowerment among gays and lesbians of African descent.

PULSE magazine talks with the members of ITLA's Board of Directors on what impact the organization is making in the lives of many and what the future holds for this vital community resource.

Organizational Rebirth

The task to help eradicate homophobia and the fight to increase the public's awareness of the issues that affect Black gays and lesbians is at times an overwhelming responsibility, we are encouraged by our efforts to provide safe and open spaces that showcase the talents and contributions we make to society.

Our Pride celebration is more than a weekend and more than a party, we are about building relationships that catapult change and mobilizes our community to stand up and represent.

Why Black Pride?

One of the questions we often receive is: why are Black Pride events separate from white gay pride events?

There are specific issues that face Black men and women that are different from issues that affect other groups. We live in a world where a person's race and ethnicity still, in many cases, poses a set of difficult challenges and so through our advocacy and programming we create vehicles address those issues.

We partner with the Atlanta Pride (the city's white pride organization) on a number of projects and are inclusive to the support and help of a host of great community allies who are not Black. The work of creating more tolerant environments for Black gays and lesbians cannot be done alone.

We are a supplement, another alternative that serves an underserved market and we are honored to be of service to that targeted demographic.

Moving Forward

We are working to really move ITLA forward as evident by our 2007 theme: Moving to the Next Level. Through our leadership and the work of our committed volunteers we've changed the look of the organization by redesigning our logo/website. We have been able to forge historic partnerships with the City of Atlanta, producers of Montreux Jazz Festival Atlanta and other groups that demonstrate our relevance. We look forward to implementing internal operational systems that will help us deliver a level of customer service we hope exceeds people's expectations. We are calling on those interested to bring their gifts and talents to the table to help us.

For more information log onto: www.inthelifeatl.com

In The Life Atlanta, Inc. Board of Directors. Back row (l to r): Raymond Duke, Anaré V. Holmes, Kenneth T. Jones, Michael Slaughter. Front row (l to r): Ebonee Bradford, Zandra Conway, Michael Caywood and D'Lovely Gibson. *Image/Julie Yarbrough of JY Photography.*

Highlights of ITLA's 2007 Atlanta Black Pride: Moving to the Next Level
Aug. 29-Sept. 3, Sheraton Atlanta Hotel, 165 Courtland Street NE

- One Night Only: Aretha Franklin in Concert
- A Conversation with Jonathan Plummer
- The See Us In The Life Film Festival
- SpeakFire Spoken Word and Poetry Slam
- From Broadway to Hollywood Fashion Show
- Literary Café
- Taking Pride in Healthy Living Expo
- Interfaith Service
- The Stand Up and Represent Pride March

HOLLA BACK

Real Talk with Jamal

A female friend I've experimented with in the past wants to have sex with me again. Even though I'm happy in my seven-year relationship with a guy, I have lately been dreaming about another encounter with this female while having sex with my lover. What do I do?

– Joseph (Los Angeles, CA)

Dear Joseph: The flag is crimson right now—don't do it! The first step is to sit somewhere with a calming beverage and conduct a full-scale investigation into what—beyond a steamy recollection—is motivating your desires for this woman. While you're at it ask yourself if there is anything missing in your bedroom that your partner (with his specific genitalia) can do to keep you focused. No matter what answers you reach, take the new-found clarity along with another calming beverage to your lover and talk. Let him in if you love him because if trust collapses you may need pricey contractors to build it back. After you've sorted this out take him into the bedroom and wear him down. Now, should the conversation turn left before you invite the other woman to the fun, please make sure that neither you nor your lover are insecure, overly possessive, or rigid. Even if this is all good, proceed with extreme caution. From what it sounds like, this woman is not interested in experimenting with your lover, too.

Is homosexuality really a sin? What is sin? Is it real or did we make it up?

– CLH (Atlanta, GA)

Dear CLH: We don't have enough space on this page for a conversation about sin (email me if you're burning for dialogue), but whether we should worry about the sin in our gaytivities gets into whether we strictly follow doctrine and, if so, whose, at which church, and with what text. It gets into my favorite argument (this one outside the pulpit) that since same-sex bumping is unnatural, it's a sin. If that's the case, we're in good company; for social grooming the pygmy chimpanzees like to get freaky (try penis fencing and female crotch-to-crotch rubbing) and about 100 species of reef fish are simultaneous hermaphrodites. In our part of the animal kingdom, we get into the whole issue of choice, which is baffling since most of the black DL community is comprised of men losing the fight against ironclad Christian expectation that we must be hypermasculine. This gets into a lot, and the answer is definitely more personal than academic. There's one certainty—this generation has swapped traditional religion for spiritual treading that allows them to find divinity, morality, and peace of mind in places less restrictive than doctrine. Maybe there you'll find your answer.

As a single straight woman, I find it hard to imagine the challenges of life with another woman. I think about the excessive emotion involved and the hormones going crazy. How are gay couples able to last so long?

– K. Mac (New York, NY)

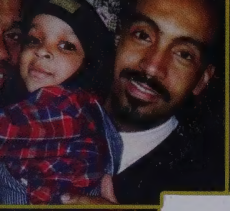
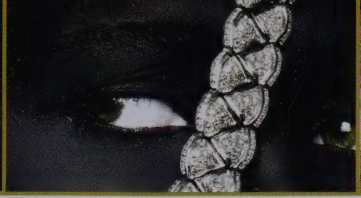
Dear K: Of course, there are no hard and fast rules for a cannonball-proof relationship, gay or otherwise. But the common thread I see in same-sex relationships that have lasted more than 10 years is that the couples have a level of self-actualization and honesty that withstands grenades like cheating, divergent career paths, and trust issues. Most of these men and women don't subscribe to the idea of traditional heterosexual role-playing, but instead respect each other's man- or womanhood in whatever incarnation. As Dr. Angelou says, nature likes balance, which is hard to create with two of the same anything, no doubt. Still it's about commitment and compromise, and if you succeed in finding your soul mate, the emotional and spiritual connection can transcend gender.

I'm a black gay man that has been single for over 10 years. Yes, I've gone out with guys during that time, but most dating situations usually only last 2 to 6 months. The longest relationship I've had lasted 9 months. It was suggested by a friend that maybe I should lower my standards as to the type of partner/mate I want in order to have a successful relationship. It's not that I'm looking for men with washboard abs, a homo-thug, or anything like that, but could my friend's advice be sound and, if so, is that fair to all parties involved?

– Edward (Nashville, TN)

Dear Edward: When you lower your standards you raze the self you've built, and then you have an incomplete person to offer some wonderful man. Perhaps modifying your deal breaker list is the better way to go. Unless you have a special machine (a la, Weird Science), it may be difficult to nab the upwardly-mobile, healthy, wealthy, talented, good-looking, brilliant, non-smoking, open-minded Adonis who lives in his own property own the more spacious side of the closet door, and has no tendency toward insecurity or clinginess. Since "perfect" as a concept is defeating from the jump, it may make more sense to shift some of these ideals to a priority list not entitled "Must Haves" and include the high-standard strong values—independence, strength, decency, consideration, honesty, and the like.

Jamal wants to hear from you. Send your questions to: HollaBack@pulsemag.org

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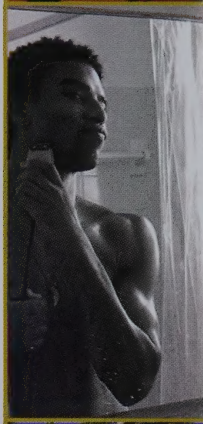
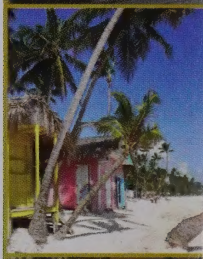
THE HEARTBEAT OF BLACK GAY AMERICA

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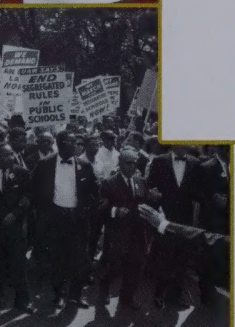

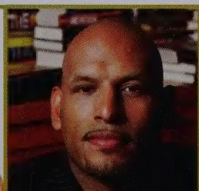

YOU CHOOSE

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THE HEARTBEAT OF BLACK GAY AMERICA

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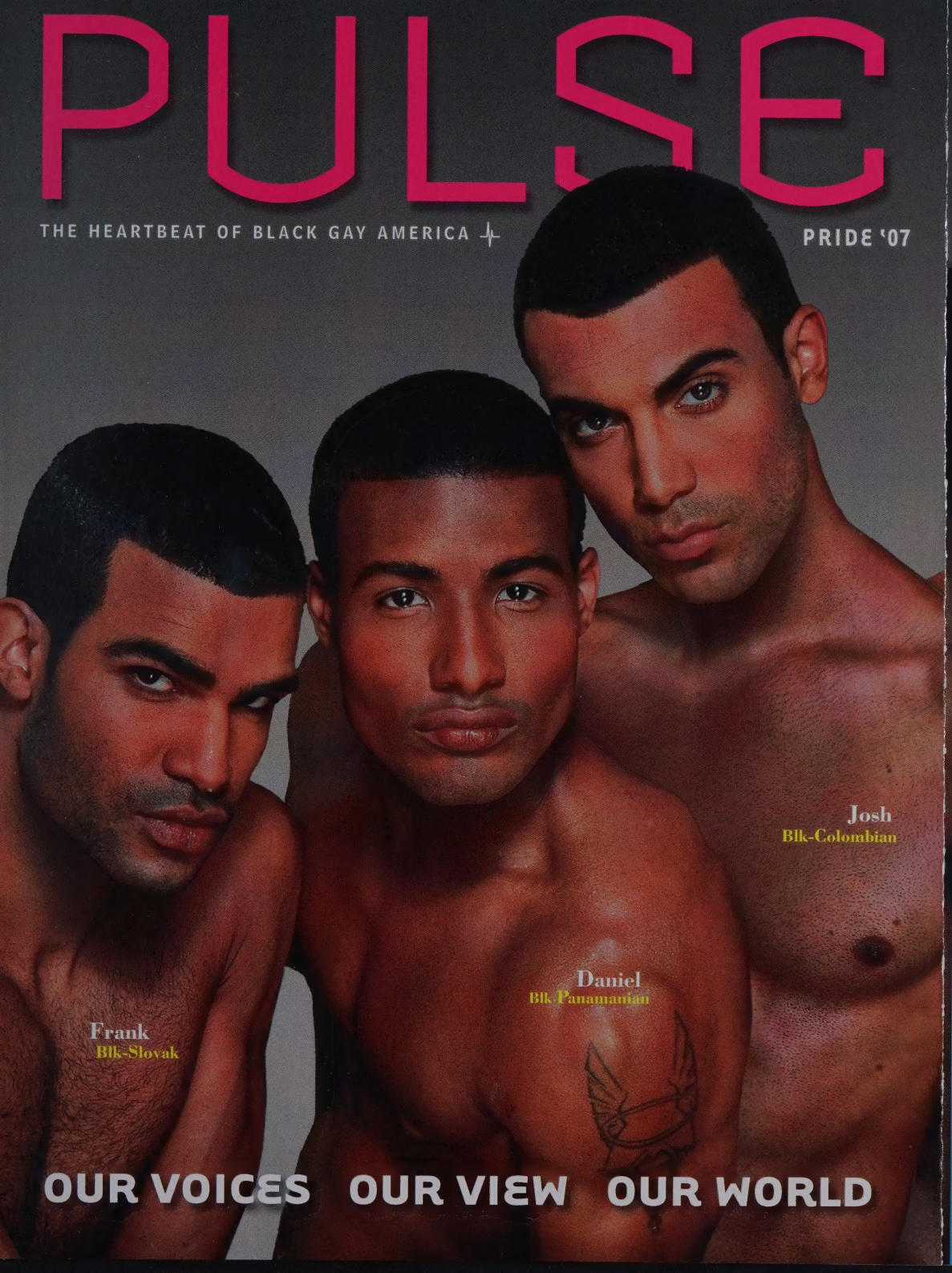

OUR VOICES OUR VIEW OUR WORLD

Isaac
Blk-Native American
Raphael
Blk-Egyptian
Lawrence
Blk-Italian

Jimi
Blk-East Indian
William
Blk-Norwegian
Kenwyn
Blk-Trinidadian

Important Information

INDICATION: ATRIPLA™ (efavirenz 600 mg/emtricitabine 200 mg/tenofovir disoproxil fumarate 300 mg) is a prescription medication used alone as a complete regimen or with other medicines to treat HIV infection in adults.

ATRIPLA does not cure HIV and has not been shown to prevent passing HIV to others. See your healthcare provider regularly.

IMPORTANT SAFETY INFORMATION:

Contact your healthcare provider right away if you experience any of the following side effects or conditions associated with ATRIPLA:

- **Nausea, vomiting, unusual muscle pain, and/or weakness. These may be signs of a buildup of acid in the blood (lactic acidosis), which is a serious medical condition.**
- **Light colored stools, dark colored urine, and/or if your skin or the whites of your eyes turn yellow. These may be signs of serious liver problems.**
- **If you have HIV and hepatitis B virus (HBV), your liver disease may suddenly get worse if you stop taking ATRIPLA. Do not stop taking ATRIPLA unless directed by your healthcare provider.**

Do not take ATRIPLA if you are taking the following medicines because serious and life-threatening side effects may occur when taken together: Hismanal® (astemizole), Propulsid® (cisapride), Versed® (midazolam), Halcion® (triazolam), or ergot derivatives (for example, Wigraine® and Cafergot®).

In addition, ATRIPLA should not be taken with: Combivir® (lamivudine/zidovudine), Emtriva® (emtricitabine), Epivir® or Epivir-HBV® (lamivudine), Epzicom™ (abacavir sulfate/lamivudine), Sustiva® (efavirenz), Trizivir® (abacavir sulfate/lamivudine/zidovudine), Truvada® (emtricitabine/tenofovir disoproxil fumarate [DF]), or Viread® (tenofovir DF), because they contain the same or similar active ingredients as ATRIPLA.

Vfend® (voriconazole) should not be taken with ATRIPLA since it may lose its effect or may increase the chance of having side effects from ATRIPLA. Fortovase®, Invirase® (saquinavir mesylate) should not be used as the only protease inhibitor in combination with ATRIPLA.

Taking ATRIPLA with St. John's wort *(Hypericum perforatum)* is not recommended as it may cause decreased levels of ATRIPLA, increased viral load, and possible resistance to ATRIPLA or cross-resistance to other anti-HIV drugs.

This list of medicines is not complete. Discuss with your healthcare provider all prescription and nonprescription medicines, vitamins, and herbal supplements you are taking or plan to take.

Contact your healthcare provider right away if you experience any of the following side effects or conditions:

- **Severe depression, strange thoughts, or angry/abnormal behavior** have been reported by a small number of patients. Some patients have had thoughts of suicide and a few have actually committed suicide. These problems may occur more often in patients who have had mental illness.
- **Dizziness, trouble sleeping or concentrating, drowsiness, unusual dreams, and/or hallucinations** are common, and tend to go away after taking ATRIPLA™ (efavirenz 600 mg/emtricitabine 200 mg/tenofovir disoproxil fumarate 300 mg) for a few weeks. Symptoms were severe in a few patients and some patients discontinued therapy. These symptoms may become more severe with the use of alcohol and/or mood-altering (street) drugs. If you are dizzy, have trouble concentrating, and/or are drowsy, avoid activities that may be dangerous, such as driving or operating machinery.
- **Kidney or liver problems.** If you have had kidney or liver problems, including hepatitis infection or take other medicines that may cause kidney or liver problems, your healthcare provider should do regular blood tests.
- **Pregnancy: Women should not become pregnant while taking ATRIPLA.** Serious birth defects have been seen in children of women treated during pregnancy with one of the medicines in ATRIPLA. Women must use a reliable form of barrier contraception, such as a condom or diaphragm, even if they also use other methods of birth control.
- **Breast-Feeding: Women with HIV should not breast-feed** because they can pass HIV through their milk to the baby. Also, ATRIPLA may pass through breast milk and cause serious harm to the baby.
- **Rash** is a common side effect that usually goes away without treatment, but may be serious in a small number of patients.
- **Seizures** have occurred in patients taking a component of ATRIPLA, usually in those with a history of seizures. If you have ever had seizures, or take medicine for seizures, your healthcare provider may want to monitor you.
- **Bone changes.** If you have had bone problems in the past, your healthcare provider may want to check your bones.
- **If you have ever had mental illness or use illegal drugs or alcohol.**

Changes in body fat have been seen in some people taking anti-HIV medicines. The cause and long-term health effects are not known.

Common side effects of ATRIPLA include tiredness, headache, upset stomach, vomiting, gas, and diarrhea. Skin discoloration (small spots or freckles) may also happen with ATRIPLA.

You should take ATRIPLA once daily on an empty stomach. Taking ATRIPLA at bedtime may make some side effects less bothersome.

If you or someone you know needs help paying for medicine, call 1-888-4PPA-NOW (1-888-477-2669). Or go to www.pparx.org

Partnership for Prescription Assistance

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The first and only complete HIV regimen in one pill daily. ATRIPLA may be taken alone or with other HIV medicines.

- **Effective:** Proven to lower viral load to undetectable† and help raise T-cell (CD4+) count through 48 weeks of a clinical study.
- **One Pill, Once a Day:** Take on an empty stomach, preferably at bedtime, and you're done with ATRIPLA for 24 hours. Taking ATRIPLA at bedtime may make some side effects less bothersome.
- **Tolerability:** Well-established patient experience in clinical studies with the three proven medicines in ATRIPLA.

† Undetectable was defined as a viral load of less than 400 copies/mL.

ATRIPLA™
(efavirenz 600 mg/emtricitabine 200 mg/
tenofovir disoproxil fumarate 300 mg) Tablets

Ask your doctor if ATRIPLA is right for you.

It all adds up to one.™ *

visit www.ATRIPLA.com

* ATRIPLA is a combination of 3 HIV medicines – SUSTIVA® (efavirenz), EMTRIVA® (emtricitabine), and VIREAD® (tenofovir disoproxil fumarate).

Please see Patient Information including "What is the most important information I should know about ATRIPLA?" on the next page.

PATIENT INFORMATION

℞ ONLY

ATRIPLA™ (uh TRIP luh) Tablets

ALERT: Find out about medicines that should NOT be taken with ATRIPLA (efavirenz 600 mg/emtricitabine 200 mg/ tenofovir disoproxil fumarate 300 mg).

Please also read the section **"MEDICINES YOU SHOULD NOT TAKE WITH ATRIPLA."**

Generic name: efavirenz, emtricitabine and tenofovir disoproxil fumarate (eh FAH vih renz, em tri SIT uh bean and te NOE' fo veer dye soe PROX il FYOU mar ate)

Read the Patient Information that comes with ATRIPLA before you start taking it and each time you get a refill since there may be new information. This information does not take the place of talking to your healthcare provider about your medical condition or treatment. You should stay under a healthcare provider's care when taking ATRIPLA. **Do not change or stop your medicine without first talking with your healthcare provider.** Talk to your healthcare provider or pharmacist if you have any questions about ATRIPLA.

What is the most important information I should know about ATRIPLA?

- **Some people who have taken medicine like ATRIPLA (which contains nucleoside analogs) have developed a serious condition called lactic acidosis** (build up of an acid in the blood). Lactic acidosis can be a medical emergency and may need to be treated in the hospital. **Call your healthcare provider right away if you get the following signs or symptoms of lactic acidosis:**
  - You feel very weak or tired.
  - You have unusual (not normal) muscle pain.
  - You have trouble breathing.
  - You have stomach pain with nausea and vomiting.
  - You feel cold, especially in your arms and legs.
  - You feel dizzy or lightheaded.
  - You have a fast or irregular heartbeat.
- **Some people who have taken medicines like ATRIPLA have developed serious liver problems called hepatotoxicity,** with liver enlargement (hepatomegaly) and fat in the liver (steatosis). **Call your healthcare provider right away if you get the following signs or symptoms of liver problems:**
  - Your skin or the white part of your eyes turns yellow (jaundice).
  - Your urine turns dark.
  - Your bowel movements (stools) turn light in color.
  - You don't feel like eating food for several days or longer.
  - You feel sick to your stomach (nausea).
  - You have lower stomach area (abdominal) pain.
- **You may be more likely to get lactic acidosis or liver problems** if you are female, very overweight (obese), or have been taking nucleoside analog-containing medicines, like ATRIPLA, for a long time.
- **If you also have Hepatitis B Virus (HBV) infection and you stop taking ATRIPLA, you may get a "flare-up" of your hepatitis. A "flare-up" is when the disease suddenly returns in a worse way than before.** Patients with HBV who stop taking ATRIPLA need close medical follow-up for several months, including medical exams and blood tests to check for hepatitis that could be getting worse. ATRIPLA is not approved for the treatment of HBV, so you must discuss your HBV therapy with your healthcare provider.

What is ATRIPLA?

ATRIPLA contains 3 medicines, SUSTIVA® (efavirenz), EMTRIVA® (emtricitabine) and VIREAD® (tenofovir disoproxil fumarate also called tenofovir DF) combined in one pill. EMTRIVA and VIREAD are HIV (human immunodeficiency virus) nucleoside analog reverse transcriptase inhibitors (NRTIs) and SUSTIVA is an HIV non-nucleoside analog reverse transcriptase inhibitor (NNRTI). VIREAD and EMTRIVA are the components of TRUVADA®. ATRIPLA can be used alone as a complete regimen, or in combination with other anti-HIV medicines to treat people with HIV infection. ATRIPLA is for adults age 18 and over. ATRIPLA has not been studied in children under age 18 or adults over age 65.

HIV infection destroys CD4 (T) cells, which are important to the immune system. The immune system helps fight infection. After a large number of T cells are destroyed, acquired immune deficiency syndrome (AIDS) develops.

ATRIPLA (efavirenz 600 mg/emtricitabine 200 mg/tenofovir disoproxil fumarate 300 mg) helps block HIV reverse transcriptase, a viral chemical in your body (enzyme) that is needed for HIV to multiply. ATRIPLA lowers the amount of HIV in the blood (viral load). ATRIPLA (efavirenz 600 mg/emtricitabine 200 mg/tenofovir disoproxil fumarate 300 mg) may also help to increase the number of T cells (CD4 cells), allowing your immune system to improve. Lowering the amount of HIV in the blood lowers the chance of death or infections that happen when your immune system is weak (opportunistic infections).

Does ATRIPLA cure HIV-1 or AIDS?

ATRIPLA does not cure HIV infection or AIDS. The long-term effects of ATRIPLA are not known at this time. People taking ATRIPLA may still get opportunistic infections or other conditions that happen with HIV infection. Opportunistic infections are infections that develop because the immune system is weak. Some of these conditions are pneumonia, herpes virus infections, and *Mycobacterium avium complex* (MAC) infection. **It is very important that you see your healthcare provider regularly while taking ATRIPLA.**

Does ATRIPLA reduce the risk of passing HIV-1 to others?

ATRIPLA has not been shown to lower your chance of passing HIV to other people through sexual contact, sharing needles, or being exposed to your blood.

- **Do not share needles or other injection equipment.**
- **Do not share personal items that can have blood or body fluids on them, like toothbrushes or razor blades.**
- **Do not have any kind of sex without protection.** Always practice safer sex by using a latex or polyurethane condom or other barrier to reduce the chance of sexual contact with semen, vaginal secretions, or blood.

Who should not take ATRIPLA?

Together with your healthcare provider, you need to decide whether ATRIPLA is right for you.

Do not take ATRIPLA if you are allergic to ATRIPLA or any of its ingredients. The active ingredients of ATRIPLA are efavirenz, emtricitabine, and tenofovir DF. See the end of this leaflet for a complete list of ingredients.

What should I tell my healthcare provider before taking ATRIPLA?

Tell your healthcare provider if you:

- **Are pregnant or planning to become pregnant** (see "What should I avoid while taking ATRIPLA?").
- **Are breast-feeding** (see "What should I avoid while taking ATRIPLA?").
- **Have kidney problems or are undergoing kidney dialysis treatment.**
- **Have bone problems.**
- **Have liver problems, including Hepatitis B Virus infection.** Your healthcare provider may want to do tests to check your liver while you take ATRIPLA.
- **Have ever had mental illness or are using drugs or alcohol.**
- **Have ever had seizures or are taking medicine for seizures.**

What important information should I know about taking other medicines with ATRIPLA?

ATRIPLA may change the effect of other medicines, including the ones for HIV, and may cause serious side effects. Your healthcare provider may change your other medicines or change their doses. Other medicines, including herbal products, may affect ATRIPLA. For this reason, **it is very important to** let all your healthcare providers and pharmacists know what medications, herbal supplements, or vitamins you are taking.

MEDICINES YOU SHOULD NOT TAKE WITH ATRIPLA

- The following medicines may cause serious and life-threatening side effects when taken with ATRIPLA. You should not take any of these medicines while taking ATRIPLA: Hismanol® (astemizole), Propulsid® (cisapride), Versed® (midazolam), Halcion® (triazolam), ergot medications (for example, Migraine® and Cafergot®).
- ATRIPLA also should not be used with COMBIVIR®, EMTRIVA, EPIVIR®, EPIVIR-HBV®, EPZICOM™, TRIZIVIR®, SUSTIVA, TRUVADA®, or VIREAD.
- Vfend® (voriconazole) should not be taken with ATRIPLA since it may lose its effect or may increase the chance of having side effects from ATRIPLA.

It is also important to tell your healthcare provider if you are taking any of the following:

- Fortovase®, Invirase® (saquinavir), or Biaxin® (clarithromycin); **these medicines may need to be replaced with another medicine when taken with ATRIPLA.**
- Crixivan® (indinavir); Methadone; Mycobutin® (rifabutin); Rifampin; cholesterol-lowering medicines such as Lipitor® (atorvastatin), PRAVACHOL® (pravastatin), and Zocor® (simvastatin); or Zoloft® (sertraline); **these medicines may need to have their dose changed when taken with ATRIPLA.**
- Videx®, Videx® EC (didanosine); tenofovir DF (a component of ATRIPLA) may increase the amount of didanosine in your blood, which could result in more side effects. **You may need to be monitored more carefully** if you are taking ATRIPLA and didanosine together. Also, the dose of didanosine may need to be changed.
- Reyataz® (atazanavir sulfate) or Kaletra® (lopinavir/ritonavir); these medicines may increase the amount of tenofovir DF (a component of ATRIPLA) in your blood, which could result in more side effects. **You may need to be monitored more carefully** if you are taking ATRIPLA and either Reyataz or Kaletra together. Also, the dose of Reyataz or Kaletra may need to be changed.
- Medicine for seizures [for example, Dilantin® (phenytoin), Tegretol® (carbamazepine), or phenobarbital]; your healthcare provider may want to switch you to another medicine or check drug levels in your blood from time to time.
- **Taking St. John's wort *(Hypericum perforatum)*, or products containing St. John's wort with ATRIPLA is not recommended.** St. John's wort is a herbal product sold as a dietary supplement. Talk with your healthcare provider if you are taking or are planning to take St. John's wort. Taking St. John's wort may decrease ATRIPLA levels and lead to increased viral load and possible resistance to ATRIPLA or cross-resistance to other anti-HIV drugs.

These are not all the medicines that may cause problems if you take ATRIPLA (efavirenz 600 mg/emtricitabine 200 mg/ tenofovir disoproxil fumarate 300 mg). Be sure to tell your healthcare provider about all medicines that you take.

Keep a complete list of all the prescription and nonprescription medicines as well as any herbal remedies that you are taking, how much you take, and how often you take them. Make a new list when medicines or herbal remedies are added or stopped, or if the dose changes. Give copies of this list to all of your healthcare providers and pharmacists **every** time you visit your healthcare provider or fill a prescription. This will give your healthcare provider a complete picture of the medicines you use. Then he or she can decide the best approach for your situation.

How should I take ATRIPLA?

- Take the exact amount of ATRIPLA your healthcare provider prescribes. Never change the dose on your own. Do not stop this medicine unless your healthcare provider tells you to stop.
- You should take ATRIPLA on an empty stomach.
- Swallow ATRIPLA with water.
- Taking ATRIPLA at bedtime may make some side effects less bothersome.
- Do not miss a dose of ATRIPLA. If you forget to take ATRIPLA, take the missed dose right away, unless it is almost time for your next dose. Do not double the next dose. Carry on with your regular dosing schedule. If you need help in planning the best times to take your medicine, ask your healthcare provider or pharmacist.
- If you believe you took more than the prescribed amount of ATRIPLA, contact your local poison control center or emergency room right away.
- Tell your healthcare provider if you start any new medicine or change how you take old ones. Your doses may need adjustment.
- When your ATRIPLA supply starts to run low, get more from your healthcare provider or pharmacy. This is very important because the amount of virus in your blood may increase if the medicine is stopped for even a short time. The virus may develop resistance to ATRIPLA and become harder to treat.
- Your healthcare provider may want to do blood tests to check for certain side effects while you take ATRIPLA.

What should I avoid while taking ATRIPLA?

- **Women taking ATRIPLA should not become pregnant.** Serious birth defects have been seen in the babies of animals and women treated with efavirenz (a component of ATRIPLA) during pregnancy. It is not known whether efavirenz caused these defects. **Tell your healthcare provider right away if you are pregnant.** Also talk with your healthcare provider if you want to become pregnant.
- Women should not rely only on hormone-based birth control, such as pills, injections, or implants, because ATRIPLA may make these contraceptives ineffective. Women must use a reliable form of barrier contraception, such as a condom or diaphragm, even if they also use other methods of birth control.
- **Do not breast-feed if you are taking ATRIPLA.** The Centers for Disease Control and Prevention recommend that mothers with HIV not breast-feed because they can pass the HIV through their milk to the baby. Also, ATRIPLA may pass through breast milk and cause serious harm to the baby. Talk with your healthcare provider if you are breast-feeding. You should stop breast-feeding or may need to use a different medicine.
- Taking ATRIPLA (efavirenz 600 mg/emtricitabine 200 mg/tenofovir disoproxil fumarate 300 mg) with alcohol or other medicines causing similar side effects as ATRIPLA, such as drowsiness, may increase those side effects.
- Do not take any other medicines, including prescription and nonprescription medicines and herbal products, without checking with your healthcare provider.
- **Avoid doing things that can spread HIV infection** since ATRIPLA does not stop you from passing the HIV infection to others.

What are the possible side effects of ATRIPLA?

ATRIPLA may cause the following serious side effects:

- **Lactic acidosis** (buildup of an acid in the blood). Lactic acidosis can be a medical emergency and may need to be treated in the hospital. **Call your healthcare provider right away if you get signs of lactic acidosis.** (See "What is the most important information I should know about ATRIPLA?")
- **Serious liver problems (hepatotoxicity),** with liver enlargement (hepatomegaly) and fat in the liver (steatosis). Call your healthcare provider right away if you get any signs of liver problems. (See "What is the most important information I should know about ATRIPLA?")
- **"Flare-ups" of Hepatitis B Virus (HBV) infection,** in which the disease suddenly returns in a worse way than before, can occur if you have HBV and you stop taking ATRIPLA. Your healthcare provider will monitor your condition for several months after stopping ATRIPLA if you have both HIV and HBV infection and may recommend treatment for your HBV.
- **Serious psychiatric problems.** A small number of patients may experience severe depression, strange thoughts, or angry behavior while taking ATRIPLA. Some patients have thoughts of suicide and a few have actually committed suicide. These problems may occur more often in patients who have had mental illness. Contact your healthcare provider right away if you think you are having these psychiatric symptoms, so your healthcare provider can decide if you should continue to take ATRIPLA.
- **Kidney problems.** If you have had kidney problems in the past or take other medicines that can cause kidney problems, your healthcare provider should do regular blood tests to check your kidneys.
- **Changes in bone mineral density (thinning bones).** It is not known whether long-term use of ATRIPLA will cause damage to your bones. If you have had bone problems in the past, your healthcare provider may need to do tests to check your bone mineral density or may prescribe medicines to help your bone mineral density.

Common side effects:

Patients may have dizziness, headache, trouble sleeping, drowsiness, trouble concentrating, and/or unusual dreams during treatment with ATRIPLA. These side effects may be reduced if you take ATRIPLA at bedtime on an empty stomach. They also tend to go away after you have taken the medicine for a few weeks. If you have these common side effects, such as dizziness, it does not mean that you will also have serious psychiatric problems, such as severe depression, strange thoughts, or angry behavior. Tell your healthcare provider right away if any of these side effects continue or if they bother you. It is possible that these symptoms may be more severe if ATRIPLA is used with alcohol or mood altering (street) drugs.

If you are dizzy, have trouble concentrating, or are drowsy, avoid activities that may be dangerous, such as driving or operating machinery.

Rash may be common. Rashes usually go away without any change in treatment. In a small number of patients, rash may be serious. If you develop a rash, call your healthcare provider right away.

Other common side effects include tiredness, upset stomach, vomiting, gas, and diarrhea.

Other possible side effects with ATRIPLA include:

- Changes in body fat. Changes in body fat develop in some patients taking anti-HIV medicine. These changes may include an increased amount of fat in the upper back and neck ("buffalo hump"), in the breasts, and around the trunk. Loss of fat from the legs, arms, and face may also happen. The cause and long-term health effects of these fat changes are not known.
- Skin discoloration (small spots or freckles) may also happen with ATRIPLA.

Tell your healthcare provider or pharmacist if you notice any side effects while taking ATRIPLA.

Contact your healthcare provider before stopping ATRIPLA because of side effects or for any other reason.

This is not a complete list of side effects possible with ATRIPLA. Ask your healthcare provider or pharmacist for a more complete list of side effects of ATRIPLA and all the medicines you will take.

How do I store ATRIPLA?

- **Keep ATRIPLA and all other medicines out of reach of children.**
- Store ATRIPLA at room temperature 77 °F (25 °C).
- Keep ATRIPLA in its original container and keep the container tightly closed.
- Do not keep medicine that is out of date or that you no longer need. If you throw any medicines away make sure that children will not find them.

General information about ATRIPLA:

Medicines are sometimes prescribed for conditions that are not mentioned in patient information leaflets. Do not use ATRIPLA for a condition for which it was not prescribed. Do not give ATRIPLA to other people, even if they have the same symptoms you have. It may harm them.

This leaflet summarizes the most important information about ATRIPLA. If you would like more information, talk with your healthcare provider. You can ask your healthcare provider or pharmacist for information about ATRIPLA that is written for health professionals.

Do not use ATRIPLA if the seal over bottle opening is broken or missing.

What are the ingredients of ATRIPLA?

Active Ingredients: efavirenz, emtricitabine, and tenofovir disoproxil fumarate

Inactive Ingredients: croscarmellose sodium, hydroxypropyl cellulose, microcrystalline cellulose, magnesium stearate, sodium lauryl sulfate. The film coating contains black iron oxide, polyethylene glycol, polyvinyl alcohol, red iron oxide, talc, and titanium dioxide.

℞ ONLY

July 2006

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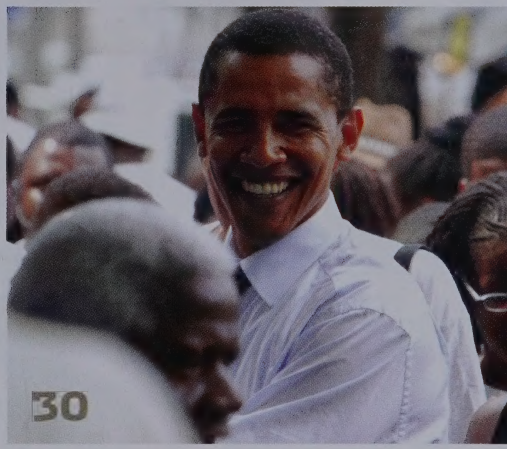

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Photo by Fadil Berisha

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Photographed by
FADIL BERISHA
Creative Director
BYRON BARNES
Grooming: Lenny Hamilton
Hair: Vincent Linsey Green
Models: Identities Inc., NYC

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TOTAL DARKNESS, TOTAL DRAMA, ...TOTAL ECLIPSE

Photo by Fadil Berisha

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LETTER FROM THE EDITOR

THE HUMAN RACE has journeyed far from its origin in Africa—the cradle of civilization; whose arts and culture have influenced the world today. Now, more than ever, we are moving toward a multicultural, multiethnic global society. The men appearing on this issue's cover are stirring depictions of the uniqueness, beauty, and strength of our brave new world. Each reflects a distinct diversity that exists within the African Diaspora, although it's our blackness that weaves us together in brotherhood. Here within, PULSE celebrates the morphing of ancestry and homeland—all the more deepening our roots with the creation of Italian, Norwegian, Colombian, Slovakian, Panamanian, Trinidadian, East Indian, Egyptian, and Native American men of color. This issue is dedicated to highlighting our Pride in cultural, racial, and sexual multiplicity.

Inside our biggest issue yet, you'll read a PULSE exclusive with Presidential hopeful, Senator **Barack Obama** whose politics focuses on addressing concerns in our community *(pg. 30)*. Hear first-hand about the amazing celebrity event designer **Preston Bailey** and his rags to riches story *(pg. 43)* and get charged to renew your call to action for gay rights by Jamaican poet and political activist **Staceyann Chin** *(pg. 16)*. Each outstanding personality reminds us of our interconnectedness. They are stellar forerunners in their plights to inspire everyone to embrace their differences and be courageous in creating a world that is just and inclusive.

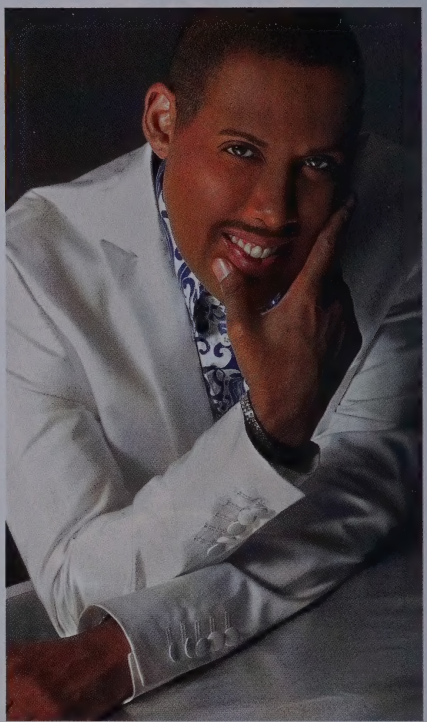
As usual, PULSE brings you thought-provoking features: **Gay Bars**, the unadulterated real deal about gay life in prison *(pg. 28)* and **Saving Face** which provides insight on restorative treatments to undo AIDS-related facial wasting *(pg. 19)*. We are also excited to introduce new lighthearted musings like **Gaybonics**, a dictionary to help decipher gay terms and expressions *(pg. 33)*. Finally, grab your bowl, mix it up, and **Toss My Salad** with our food and furnishing. It's a delicious way to go *green* this summer *(pg. 82)*.

While self-made millionaire, media mogul, and author **Russell Simmons** steps up his game to impart choice words of wisdom *(pg. 36)*, I encourage you to find time to explore each and every page of PULSE, embrace all of our diversity, and welcome those differences shared by others. Be unapologetic in celebrating your individuality as you move forward through your day-to-day encounters, and as Mr. Simmons would say DO YOU! for all the world to see.

Celebrate!

Byron Barnes

BYRON BARNES, EDITOR-IN-CHIEF



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"The human race has journeyed far from its origin in Africa; whose arts and culture have influenced the world today. Now, more than ever, we are moving toward a multicultural, multiethnic global society."

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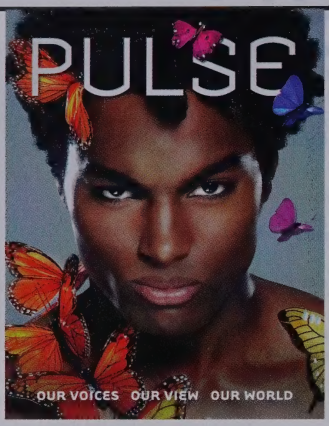

"I am pleased to finally see single black men represented in a positive light. I, personally, find it refreshing to be finally recognized in a self-affirming and totally healthy way."

BRIAN BENJAMIN WRIGHT, *Washington, DC.*

We Got Read!

You guys *Got Game!* I absolutely adored your spring issue. I was a little uncomfortable with the make-up on the models in the first issue, but this time around, it was more subtle. My friends and I often wonder why relationships are so fleeting and hard to maintain in our community. The article on polyamory *(3's Company)* was so riveting and got me thinking that perhaps many of us have been looking at the 1-on-1 construct to guide us in relationships with other men. I have started investigating other polyamorous guys in my area, but so far only non-black guys have shown interest. I am not giving up though. Thanks for a great issue and look forward to the next.

SCOT PETERS
Ft. Lauderdale, FL

Your spring issue was educational, informative, and quite entertaining and that is no mean feat. The men and the fashion spread kept me engaged throughout. Rarely do I read a magazine from cover to cover. I did this time. Heavenly sculpted fitness trainer, Ulisses *(Fit4Life)*, and eye-candy artist, Zuberi Zahur *(Hung)*, will satiate my dark chocolate fetish for a long time to come, and their articles were informative to boot.

LARRY CALHOUN
Capitol Heights, MD

I received the spring issue a few days ago and I was stunned that you guys managed to outdo the first issue *(which I thought was ground-breaking)*. As a black gay man who works with runaway youth, many of whom are gay and lesbian, the article on sexual molestation *(It's All Relative)* sounded all too familiar. I was happy to read that not all those who are abused by the adults in their lives end up being mental cases. Many have come and gone, and I hope PULSE is around for a long time.

CLARENCE BROWNE
London, UK

I am pleased to finally see single black men represented in a positive light. For far too long, we have been marginalized by the gay community as a whole and I, personally, find it refreshing to be finally recognized in a self-affirming and totally healthy way. Imagine my surprise, when upon calling the magazine, none other than the editor-in-chief himself answered the phone! Such accessibility to the community-at-large is rare. I personally enjoyed *Holla Back* with Carnell. You don't see us giving us any kind of relationship advice ANYWHERE... kudos. Your articles on HIV are dead on *(no pun intended)* and we need to start taking responsibility for our own community.

BRIAN BENJAMIN WRIGHT
Washington, DC

Congrats! The magazine looks great! I was actually very positively surprised to see the turn it's taken. Many of the features were very engaging and eye opening in a lot of ways, too. The photography is of the highest quality. Wonderful job, guys!

SAMUEL ROBERTS
New York, NY

I just came from the Black Pride in my hometown Washington, DC and saw PULSE. I loved the magazine. I was kind of embarrassed as an African American gay man never hearing of this magazine. Can I get some back copies, if possible, and be added to the mailing list for the next issue? Several of the articles were thought-provoking and the poetry of Butta Fly Soul *(The Evil That Men Do)* was great. The fashion spread wasn't bad either. Please let me know what the subscription is and would love to contribute to the magazine or make a donation.

GREGG MIMS
Washington, DC

Write To Us!

PULSE wants to know your thoughts. Please send correspondence by e-mail to comments@pulsemag.org or by mail to PULSE Magazine c/o GMAD, Inc., 103 E. 125th Street, Suite 503, New York, NY 10035. Please include your name, address, e-mail, and phone number. Responses become the property of the magazine and, if published, may be edited for length or clarity.

HIV
I feel more in control
Proven to keep viral loads Longterm Undetectable (LU)* and helps raise CD_4 T-cell count.**
* Kaletra in combination has been proven to keep HIV Longterm Undetectable through 204 weeks in patients new to therapy. (Undetectable = HIV RNA <50 copies/mL)†
**An average increase of 440 CD_4 T-cells per cubic mL of blood.†
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Undetectable just got easier.
• No refrigeration required†
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• Once or twice daily dosing††
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†† In an ongoing clinical study, the once daily dose of Kaletra in combination has been evaluated at 48 weeks and is not recommended for treatment-experienced patients.†
Individual results may vary.

Kaletra Indication[1]

KALETRA® (lopinavir/ritonavir) is always used in combination with other anti-HIV medicines to treat people with human immunodeficiency virus (HIV) infection. KALETRA is a combination of two medicines. They are lopinavir and ritonavir. KALETRA is a type of medicine called an HIV protease (PRO-tee-ase) inhibitor. KALETRA is for adults and for children age 6 months and older.

Once daily dosing of KALETRA in combination with other anti-HIV medicines is not recommended for people with previous HIV treatment and has not been evaluated in children.

Important Safety Information[1]

KALETRA does not cure HIV infection or AIDS and does not reduce the risk of passing HIV to others.

KALETRA should not be taken if you have had an allergic reaction to KALETRA or any of its ingredients, including lopinavir or ritonavir.

Taking KALETRA with certain drugs can cause serious problems or death. KALETRA should not be taken with dihydroergotamine, ergonovine, ergotamine, and methylergonovine such as Cafergot®, Migranal®, D.H.E. 45®, Ergotrate Maleate, and Methergine, as well as Halcion®, Hismanal®, Orap®, Propulsid®, Seldane®, or Versed®. KALETRA should also not be taken with rifampin, also known as Rimactane®, Rifadin®, Rifater® or Rifamate®, Flonase®, Mevacor®, Zocor®, or products containing St. John's wort (*Hypericum perforatum*). Once daily KALETRA should not be taken with Agenerase®, Sustiva®, Viracept®, Viramune®, Dilantin®, Phenobarbital, or Tegretol®. Particular caution should be used when taking Viagra®, Cialis®, or Levitra®, since the interaction with KALETRA may result in an increase in their related side effects. Discuss all medicines, including those without a prescription and herbal products you are taking or plan to take, with your doctor or pharmacist.

Pancreatitis and liver problems, which can be fatal, have been reported in patients receiving KALETRA. Tell your doctor if you have nausea, vomiting, or abdominal pain, which may be signs of pancreatitis, or if you have or have had liver disease such as hepatitis B or C. In patients taking protease inhibitors, increased bleeding (in patients with hemophilia) and diabetes/high blood sugar have occurred. Changes in body fat have been seen in some patients receiving antiretroviral therapy. The cause and long term health effects of these conditions are not known at this time. Some patients receiving KALETRA have had large increases in triglycerides and cholesterol. Varying degrees of cross-resistance among protease inhibitors have been observed.

KALETRA® (lopinavir/ritonavir) tablets

ASK YOUR DOCTOR TODAY

The most commonly reported side effects of moderate severity are: abdominal pain, abnormal bowel movements, diarrhea, feeling weak or tired, headache, and nausea. Children taking KALETRA may sometimes get a skin rash. This is not a complete list of reported side effects.

Diarrhea may be more common in patients taking KALETRA capsules once daily compared to the twice-daily dose (57% vs. 35% of mild to severe events and possibly related to the drug; and 16% vs. 5% of at least moderate severity and possibly related to the drug as found in a clinical study).

KALETRA oral solution contains alcohol.

[1]Kaletra Prescribing Information.

Please see important patient information on adjacent page.

1-866-KALETRA (525-3872) **KALETRA.COM**

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KALETRA®

(lopinavir/ritonavir) tablets
(lopinavir/ritonavir) oral solution

ALERT: Find out about medicines that should NOT be taken with KALETRA. Please also read the section "MEDICINES YOU SHOULD NOT TAKE WITH KALETRA."

PATIENT INFORMATION

KALETRA® (kuh-LEE-tra)

Generic Name: lopinavir/ritonavir (lop-IN-uh-veer/rit-ON-uh-veer)

Read this leaflet carefully before you start taking KALETRA. Also, read it each time you get your KALETRA prescription refilled, in case something has changed. This information does not take the place of talking with your doctor when you start this medicine and at check ups. Ask your doctor if you have any questions about KALETRA.

Before taking your medicine, make sure you have received the correct medicine. Compare the name above with the name on your bottle and the appearance of your medicine with the description provided below. Contact your pharmacist immediately if you believe a dispensing error has occurred.

What is KALETRA and how does it work?

KALETRA is a combination of two medicines. They are lopinavir and ritonavir. KALETRA is a type of medicine called an HIV (human immunodeficiency virus) protease (PRO-tee-ase) inhibitor. KALETRA is always used in combination with other anti-HIV medicines to treat people with human immunodeficiency virus (HIV) infection. KALETRA is for adults and for children age 6 months and older.

HIV infection destroys CD4 (T) cells, which are important to the immune system. After a large number of T cells are destroyed, acquired immune deficiency syndrome (AIDS) develops.

KALETRA blocks HIV protease, a chemical which is needed for HIV to multiply. KALETRA reduces the amount of HIV in your blood and increases the number of T cells. Reducing the amount of HIV in the blood reduces the chance of death or infections that happen when your immune system is weak (opportunistic infections).

Does KALETRA cure HIV or AIDS?

KALETRA does not cure HIV infection or AIDS. The long-term effects of KALETRA are not known at this time. People taking KALETRA may still get opportunistic infections or other conditions that happen with HIV infection. Some of these conditions are pneumonia, herpes virus infections, and *Mycobacterium avium complex* (MAC) infections.

Does KALETRA reduce the risk of passing HIV to others?

KALETRA does not reduce the risk of passing HIV to others through sexual contact or blood contamination. Continue to practice safe sex and do not use or share dirty needles.

How should I take KALETRA?

- You should stay under a doctor's care when taking KALETRA. Do not change your treatment or stop treatment without first talking with your doctor.
- You must take KALETRA every day exactly as your doctor prescribed it. The dose of KALETRA may be different for you than for other patients. Follow the directions from your doctor, exactly as written on the label.
- Dosing in adults (including children 12 years of age and older):

The usual dose for adults is 2 tablets (400/100 mg) or 5.0 mL of the oral solution twice a day (morning and night), in combination with other anti-HIV medicines.

The doctor may prescribe KALETRA as 4 tablets or 10.0 mL of oral solution (800/200 mg) once-daily in combination with other anti-HIV medicines for some patients who have not taken anti-HIV medications in the past.

- KALETRA tablets should be swallowed whole and not chewed, broken, or crushed.
- KALETRA tablets can be taken with or without food.
- Dosing in children from 6 months to 12 years of age:

Children from 6 months to 12 years of age can also take KALETRA. The child's doctor will decide the right dose based on the child's weight.

- Take KALETRA oral solution with food to help it work better.
- Do not change your dose or stop taking KALETRA without first talking with your doctor.
- When your KALETRA supply starts to run low, get more from your doctor or pharmacy. This is very important because the amount of virus in your blood may increase if the medicine is stopped for even a short time. The virus may develop resistance to KALETRA and become harder to treat.
- Be sure to set up a schedule and follow it carefully.
- Only take medicine that has been prescribed specifically for you. Do not give KALETRA to others or take medicine prescribed for someone else.

What should I do if I miss a dose of KALETRA?

It is important that you do not miss any doses. If you miss a dose of KALETRA, take it as soon as possible and then take your next scheduled dose at its regular time. If it is almost time for your next dose, do not take the missed dose. Wait and take the next dose at the regular time. Do not double the next dose.

What happens if I take too much KALETRA?

If you suspect that you took more than the prescribed dose of this medicine, contact your local poison control center or emergency room immediately.

As with all prescription medicines, KALETRA should be kept out of the reach of young children. KALETRA liquid contains a large amount of alcohol. If a toddler or young child accidentally drinks more than the recommended dose of KALETRA, it could make him/her sick from too much alcohol. Contact your local poison control center or emergency room immediately if this happens.

Who should not take KALETRA?

Together with your doctor, you need to decide whether KALETRA is right for you.

- Do not take KALETRA if you are taking certain medicines. These could cause serious side effects that could cause death. Before you take KALETRA, you must tell your doctor about all the medicines you are taking or are planning to take. These include other prescription and non-prescription medicines and herbal supplements.

For more information about medicines you should not take with KALETRA, please read the section titled "MEDICINES YOU SHOULD NOT TAKE WITH KALETRA."

- Do not take KALETRA if you have an allergy to KALETRA or any of its ingredients, including ritonavir or lopinavir.

Can I take KALETRA with other medications?*

KALETRA may interact with other medicines, including those you take without a prescription. You must tell your doctor about all the medicines you are taking or planning to take before you take KALETRA.

MEDICINES YOU SHOULD NOT TAKE WITH KALETRA:

- Do not take the following medicines with KALETRA because they can cause serious problems or death if taken with KALETRA.
- Dihydroergotamine, ergonovine, ergotamine and methylergonovine such as Cafergot®, Migranal® D.H.E. 45®, Ergotrate Maleate, Methergine, and others
- Halcion® (triazolam)
- Hismanal® (astemizole)
- Orap® (pimozide)
- Propulsid® (cisapride)
- Seldane® (terfenadine)
- Versed® (midazolam)
- Do not take KALETRA with rifampin, also known as Rimactane®, Rifadin®, Rifater®, or Rifamate®. Rifampin may lower the amount of KALETRA in your blood and make it less effective.
- Do not take KALETRA with St. John's wort (hypericum perforatum), an herbal product sold as a dietary supplement, or products containing St. John's wort. Talk with your doctor if you are taking or planning to take St. John's wort. Taking St. John's wort may decrease KALETRA levels and lead to increased viral load and possible resistance to KALETRA or cross-resistance to other anti-HIV medicines.
- Do not take KALETRA with the cholesterol-lowering medicines Mevacor® (lovastatin) or Zocor® (simvastatin) because of possible serious reactions. There is also an increased risk of drug interactions between KALETRA and Lipitor® (atorvastatin); talk to your doctor before you take any of these cholesterol-reducing medicines with KALETRA.

Medicines that require dosage adjustments:

It is possible that your doctor may need to increase or decrease the dose of other medicines when you are also taking KALETRA. Remember to tell your doctor all medicines you are taking or plan to take.

Before you take Viagra® (sildenafil), Cialis® (tadalafil), or Levitra® (vardenafil) with KALETRA, talk to your doctor about problems these two medicines can cause when taken together. You may get increased side effects of VIAGRA, CIALIS, or LEVITRA such as low blood pressure, vision changes, and penis erection lasting more than 4 hours. If an erection lasts longer than 4 hours, get medical help right away to avoid permanent damage to your penis. Your doctor can explain these symptoms to you.

- If you are taking oral contraceptives ("the pill") or the contraceptive patch to prevent pregnancy, you should use an additional or different type of contraception since KALETRA may reduce the effectiveness of oral or patch contraceptives.
- Efavirenz (Sustiva®), nevirapine (Viramune®), Agenerase (amprenavir) and Viracept (nelfinavir) may lower the amount of KALETRA in your blood. Your doctor may increase your dose of KALETRA if you are also taking efavirenz, nevirapine, amprenavir or nelfinavir. KALETRA should not be taken once-daily with these medicines.
- If you are taking Mycobutin® (rifabutin), your doctor will lower the dose of Mycobutin.
- **A change in therapy should be considered if you are taking KALETRA with:**
  - Phenobarbital
  - Phenytoin (Dilantin® and others)
  - Carbamazepine (Tegretol® and others)

These medicines may lower the amount of KALETRA in your blood and make it less effective. KALETRA should not be taken once-daily with these medicines.

- If you are taking or before you begin using inhaled Flonase® (fluticasone propionate) talk to your doctor about problems these two medicines may cause when taken together. Your doctor may choose not to keep you on inhaled Flonase®.
- **Other Special Considerations:**

KALETRA oral solution contains alcohol. Talk with your doctor if you are taking or planning to take metronidazole or disulfiram. Severe nausea and vomiting can occur.

- **If you are taking both didanosine (Videx®) and KALETRA:**

Didanosine (Videx®) can be taken at the same time as KALETRA tablets without food. Didanosine (Videx®) should be taken one hour before or two hours after KALETRA oral solution.

What are the possible side effects of KALETRA?

- This list of side effects is **not** complete. If you have questions about side effects, ask your doctor, nurse, or pharmacist. You should report any new or continuing symptoms to your doctor right away. Your doctor may be able to help you manage these side effects.
- The most commonly reported side effects of moderate severity that are thought to be drug related are: abdominal pain, abnormal stools (bowel movements), diarrhea, feeling weak/tired, headache, and nausea. Children taking KALETRA may sometimes get a skin rash.
- Blood tests in patients taking KALETRA may show possible liver problems. People with liver disease such as Hepatitis B and Hepatitis C who take KALETRA may have worsening liver disease. Liver problems including death have occurred in patients taking KALETRA. In studies, it is unclear if KALETRA caused these liver problems because some patients had other illnesses or were taking other medicines.
- Some patients taking KALETRA can develop serious problems with their pancreas (pancreatitis), which may cause death. You have a higher chance of having pancreatitis if you have had it before. Tell your doctor if you have nausea, vomiting, or abdominal pain. These may be signs of pancreatitis.
- Some patients have large increases in triglycerides and cholesterol. The long-term chance of getting complications such as heart attacks or stroke due to increases in triglycerides and cholesterol caused by protease inhibitors is not known at this time.
- Diabetes and high blood sugar (hyperglycemia) occur in patients taking protease inhibitors such as KALETRA. Some patients had diabetes before starting protease inhibitors, others did not. Some patients need changes in their diabetes medicine. Others needed new diabetes medicine.
- Changes in body fat have been seen in some patients taking antiretroviral therapy. These changes may include increased amount of fat in the upper back and neck ("buffalo hump"), breast, and around the trunk. Loss of fat from the legs, arms and face may also happen. The cause and long term health effects of these conditions are not known at this time.
- Some patients with hemophilia have increased bleeding with protease inhibitors.
- There have been other side effects in patients taking KALETRA. However, these side effects may have been due to other medicines that patients were taking or to the illness itself. Some of these side effects can be serious.

What should I tell my doctor before taking KALETRA?

- *If you are pregnant or planning to become pregnant:* The effects of KALETRA on pregnant women or their unborn babies are not known.
- *If you are breast-feeding:* Do not breast-feed if you are taking KALETRA. You should not breast-feed if you have HIV. If you are a woman who has or will have a baby, talk with your doctor about the best way to feed your baby. You should be aware that if your baby does not already have HIV, there is a chance that HIV can be transmitted through breast- feeding.
- *If you have liver problems:* If you have liver problems or are infected with Hepatitis B or Hepatitis C, you should tell your doctor before taking KALETRA.
- *If you have diabetes:* Some people taking protease inhibitors develop new or more serious diabetes or high blood sugar. Tell your doctor if you have diabetes or an increase in thirst or frequent urination.
- *If you have hemophilia:* Patients taking KALETRA may have increased bleeding.

How do I store KALETRA?

- Keep KALETRA and all other medicines out of the reach of children.
- KALETRA tablets should be stored at room temperature. Exposure of Kaletra tablets to high humidity outside the original container for longer than 2 weeks is not recommended.
- Refrigerated KALETRA oral solution remains stable until the expiration date printed on the label. If stored at room temperature up to 77°F (25°C), KALETRA oral solution should be used within 2 months.
- Avoid exposure to excessive heat.

Do not keep medicine that is out of date or that you no longer need. Be sure that if you throw any medicine away, it is out of the reach of children.

General advice about prescription medicines:

Talk to your doctor or other health care provider if you have any questions about this medicine or your condition. Medicines are sometimes prescribed for purposes other than those listed in a Patient Information Leaflet. If you have any concerns about this medicine, ask your doctor. Your doctor or pharmacist can give you information about this medicine that was written for health care professionals. Do not use this medicine for a condition for which it was not prescribed. Do not share this medicine with other people.

* The brands listed are trademarks of their respective owners and are not trademarks of Abbott Laboratories. The makers of these brands are not affiliated with and do not endorse Abbott Laboratories or its products.

Ref: 03-5418-R1
Revised: October, 2005

05J-036-L298-2 **MASTER**

Abbott Laboratories
North Chicago, IL 60064, U.S.A.

06A-036-N283-5
PRINTED IN U.S.A.

Quiet as it's Kept...

PULSE tastemaker's roundtable on what's in and out...

OUT: Having only Gay friends and attending only Gay events
IN: Being open to 'mixed' scenes and expanding your social circle.

OUT: Paris Hilton in jail
IN: Nicole Richie in jail

OUT: Boxy Boxer shorts
IN: Tightey Whiteys

OUT: The debacle in Iraq and Afghanistan
IN: The pogrom in Darfur and the Gaza Strip

OUT: Cruising online
IN: Cruising the streets

OUT: Isaiah Washington
IN: Isaiah Washington out of a job

OUT: Soul crooner Robin Thicke with *Lost Without You*
IN: Phine-ass R&B hunk Tank with *Please Don't Go*

OUT: Spending a 'grip' on Platinum bling at the jewelers
IN: Cheap and Chic faux gold chains from street vendors

OUT: Men who have Sex with Men (MSM)
IN: Gay Men

OUT: The *Dreamgirls* PR machinery
IN: The wait for Jennifer Hudson's CD

OUT: Naomi and her cell phone
IN: Tyra and her microphone

OUT: Loudmouth Millionaire Donald Trump
IN: Loudmouth Billionaire Mark Cuban

OUT: Halle Berry in *Catwoman*
IN: Angelina Jolie as the top choice for *Wonder Woman*.

Photo by **Tarrice Love** *for Identities Inc.*

CATALYST 4 CHANGE

A Jamaican Sistah's Dream Deferred

by Staceyann Chin

EVERY APRIL, as the leaves begin greening toward spring, as the crisp air warms toward summer, something in me stirs. After months of braving foreign winds, screaming subways, unwilling cab drivers, and the hissing heat of my Brooklyn apartment, I am ready to forget that New York City is one of the few cities I can kiss my lover full on the mouth and wish her a *Happy Pride*. By the time May arrives, I am drunk on the nostalgia of a faraway childhood spent in perpetual summertime. Then suddenly June arrives and the reason I live here becomes clear again.

For the Jamaican lesbian in cultural exile, Jamaica is a place of contradiction and beauty. That rock has given the world Marcus Garvey, Bob Marley, June Jordan, and the most controversial reggae artist and targeted homophobe, Buju Banton. Home to the modern Rastafarian movement, the ancient rebellions of the Maroons—and the most churches per square mile in the world—Jamaica spawned in me a brash spirit of survival.

Coming out as a lesbian at the University of the West Indies in Jamaica, I thought I was more than prepared for the inevitable social backlash. I know now that no one can be prepared for such brutal violence: a dozen bigoted boys; an out lesbian; in an isolated bathroom.

After that incident I knew I was not equipped to navigate the ugly side of that spirit of resistance. Lucky visa in hand, I hightailed it to New York City. I wanted to be among people who would not persecute me for something I knew was as arbitrary as the size of my shoe. I arrived in late August 1997. The fall was the most beautiful thing I had ever seen; leaves the color of blood and fire waved their welcome. Chatty Cathy that I was I shared my lesbian joy with everyone. I had visions of shouting the word "lesbian" from a skyscraper and have the entire city shout it back. And, whosoever had an ear got an earful about the grandeur of the dyke-life I was going to have in the "free world" that was the United States of America.

Most African Americans looked at me like I was a wild, mad woman. The white lesbians I met made snide comments about the African-American community. But, in the company of most White Americans I was often praised for speaking and acting so *different* from *Black Americans*. The Jamaicans, including my relatives, had given me a wide berth.

Then I wandered through the doors of *Crazy Nanny's*.

At the corner of 7th Avenue South and Leroy was a pounding teeming bar where black lesbians—of all classes and shades—gathered, and danced, and drank while telling each other that there was nothing wrong with our loving black women. On the first floor, by the bar, is where I met the woman with whom I would have my first openly lesbian relationship. Upstairs on the dance floor, I made friends with women who would later invite me to the Audre Lorde Project, the LGBT Community Center, the Nuyorican Poet's Café, and Shades of Lavender. It was at Shades of

Lavender that I learned that every June, all across the city people *celebrated* being gay. In these small political spaces, being a biracial Black immigrant lesbian was not something to mourn or cover up. All of me was cause for poetry and protest. Fist in the air and anger in my mouth, I found a place where I could articulate the pain of my self-imposed exile. It was also an opportunity for me to give voice to the silence of the racism I had experienced in the LGBT community. The following summer, I marched in every pride parade. The Pride after that, I wielded rage from microphones in Bryant Park to Prospect Park to the small Latino stroll in Queens.

"All of me was cause for poetry and protest. Fist in the air and anger in my mouth, I found a place where I could articulate the pain of my self-imposed exile. It was also an opportunity for me to give voice to the silence of the racism I had experienced in the LGBT community..."

In the belly of a brave, politically astute, and uncompromising LGBT community, I became a rebel with a clearly defined cause. In these early audiences, the plight of poor black people in America could be held in tandem with concerns about gay marriage. The same fury that spoke out against the violence against trans-people was the same fury that called for men to be held accountable for the rape of girls and women. The bodies that moved in resistance with me in the late 90s knew that oppression is an interconnected web that holds all of us in its destructive embrace. We knew that all work toward equality would hold all of the oppressed in its arms. Every moment spent in the company of those who remembered the AIDS crisis of the 80s, or Stonewall, or the Civil Rights Movement was a call to live a life of activism—and that activism was defined by work that was done to make the lives of those we represented safer, better.

Those of us who were able to march, and rage, and rebel knew we were luckier than others. We knew that our being able to speak meant we were not among the debilitated of the most severely oppressed. That my having the freedom to do this work, meant that I was no longer living in Jamaica—that we were no longer suffering in silence in Namibia or Nebraska. In East New York, we could take a short subway ride to Manhattan where we could ignore the racist experiences and march alongside white lesbians for the right to be gay. And sometimes after we worked really hard, we would drink, and dance, and plan for the next point of protest. Even in our reveling, it was always about the work.

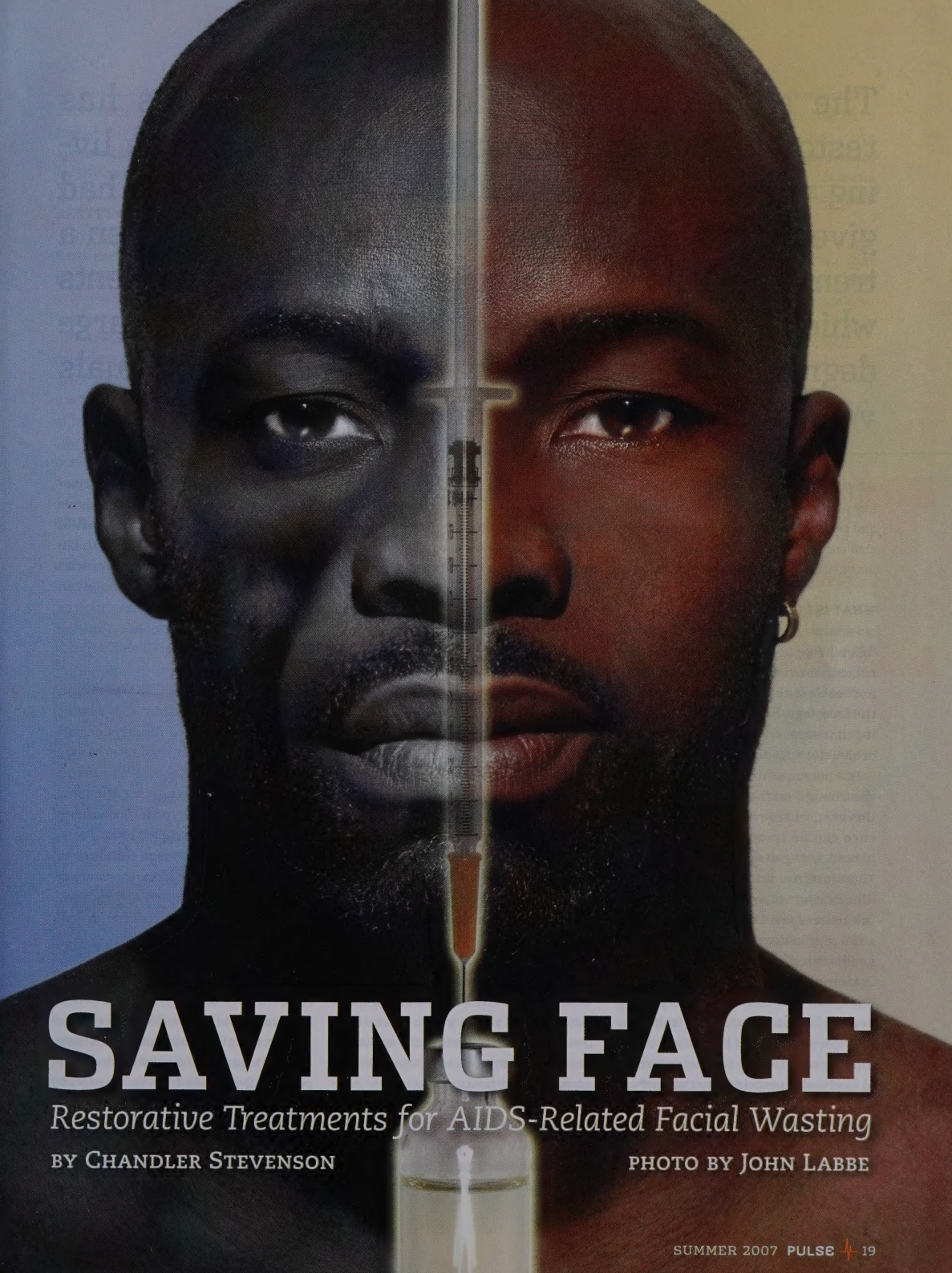
I miss the palpable activism that fueled the Pride events of the late 90s in New York City. Now, it seems that the primary purpose of most of our larger gatherings is to party. The few groups that are doing radical progressive work are forced to market activism as a fun invitation to a wild party in order to get young people to sign on. As the world outside the LGBT parameters has made space for us, so have we let go of our responsibility to the history of our resistance. We have shifted our focus away from AIDS, abortion rights, and racism. We are as taken with the frivolities of mainstream media as the least political of our era. As there emerges a thriving middle-class LGBT population, the voice of the poor in this city is muzzled. Brooklyn is rapidly becoming the new Manhattan and we simply want to push those unsightly suffering bodies toward the edge of our vision.

The dialogue about homophobia in reggae has begun to resemble that of hip hop and misogyny. So frightened are we of being tagged with derogatory labels, we begin to divorce ourselves from the communities they speak to and about. Homophobia is no more a problem that solely belongs to the Jamaican culture of reggae, than misogyny is a unique outgrowth from the culture of African-American hip hop. Homophobia exists because of a lack of comprehensive education about homosexuality. Add the drama of racism, religion, and sexism to the mix and the result is a generation that feels overwhelmed by all they must navigate to survive.

Perhaps, if I had to survive being a black lesbian in my late teens and early 20s in this political climate, I might only be able to go to work and party, and pretend that the world around me is "a-okay." The question is how do we reinvent the purposeful political progressive presence needed to push forward issues that are relevant to the *entire* LGBT community? How do we carve safe spaces for those who need it? And how do we find a voice that is nuanced and textured enough to house the diverse demographic of our growing body?

I believe we first have to admit that the needs of each sector exist and are as unique as the places from which we all spring. The body in which I cruise the world is very different from that of a white gay man in San Francisco. The history of my body is very different from that of a Puerto Rican transperson. Before the conversations about representation, and naming, and identities become one large LGBTQA (Lesbian, Gay, Bisexual, Transgender, Questioning, and Ally) soup, we need to provide room for the smaller factions to agree on the ingredients of their own conversation and concern. If every person had the space to name and safely explore all the aspects of self, the subsequent quarrels would become less about territory and more about progress.

Staceyann Chin is an out poet, political activist, and New York City resident. Keep track of her by visiting: staceyannchin.com, myspace.com/staceyannchin, or share your comments by email to: pulse@gmad.org.



SAVING FACE

Restorative Treatments for AIDS-Related Facial Wasting

BY CHANDLER STEVENSON

PHOTO BY JOHN LABBE

The advent of life-prolonging medications has restored hope and changed the lives of people living with HIV disease for the better. Many who had given up regaining their health have been a given a tremendous boost and a second wind. Minor ailments which a decade ago spelled danger, are now, to a large degree manageable, giving HIV-positive individuals very good reason to dream of a future.

HOWEVER, there is still one area that has persisted in baffling medical experts and researchers and continues to pose a challenge and threat to the quality of life of many HIV-positive people. Lipoatrophy.

WHAT IS LIPOATROPHY?

Facial wasting as it is commonly known refers to an abnormal loss of subcutaneous (just beneath the skin) fat most noticeable in the cheeks and temples of the face, legs, buttocks, and arms giving those areas a sunken and very thin or skeletal appearance.

In a person with mild facial wasting, the change might not be noticeable. However, in severe cases, the experience can be traumatic and lead to a person being discriminated against. Therefore, an outward appearance of illness can cause severe psychological distress, which could have further adverse effects on a person's well being and health.

Living with HIV is traumatic by itself, but add to it having to endure depression, anxiety, social isolation, and low self-esteem that often times directly results from how an individual is visually perceived by themselves and others. Having a change in the most noticeable feature of a person's appearance—their face—increases the urgency and desire to find an effective treatment for lipoatrophy.

CAUSE

It is still not clear why or how facial wasting occurs in HIV-positive people. Though it is believed to be a side effect of some HIV medications, especially nucleoside reverse transcriptase inhibitors (NRTIs) and protease inhibitors (PIs), it has also been seen in patients who have never been on medication. Some experts even claim that age, gender, genetic predisposition, and the length of time a person has taken antiretroviral therapy may also play a role.

TREATMENT

Research into treatment of facial wasting is improving, though there is still a long way to go in finding therapy that permanently reverses the loss of fat on the face. Fortunately, there are a number of treatment options now available. For our purpose, we will focus here on temporary facial fillers, which are injectable products that can be used to fill hollows in the face. For a long time, these treatment options were not available in the U.S. and individuals would often travel to Mexico and Europe where they were readily available. This is beginning to change, after the FDA approved some treatments.

New York City-based dermatologist N. Patrick Hennessey, M.D., who has been treating HIV/AIDS patients for many years, was asked to address any concerns that exist for people with color. He explained that often people of color when considering cosmetic procedures should be aware of conditions such as hyperpigmentation (increase in skin color) and thickening of the skin or scar-like tissue called keloids. Fortunately, in general, for most people these concerns do not have such adverse effects and are not probable with facial fillers.

HOW DO FACIAL FILLERS WORK?

Fillers involve either the dermis (middle skin layer) or the hypodermis (contains the fat cells that give the skin shape and texture). The loss of fat in this layer is what causes wasting, therefore injections into the hypodermis tend to fill the space once occupied by fat. Facial fillers can either be made from *organic* substances or made from *temporary or permanent synthetic materials*.

TYPES OF FACIAL AUGMENTATION FILLERS

Temporary fillers are broken down and removed from the body over time (weeks to months) and are considered preferable to permanent fillers which are much more difficult to remove if problems arise. Temporary fillers range from fat transplant (taking fat from part of the body and injecting it into another) to collagen to hyaluronic acid (naturally found in human connective tissue. Three brands Restylane®, Perlane®, and Hylaform® are synthetic versions of

hyaluronic acid used to change the appearance of patients with facial wasting. Currently, only Restylane® and Perlane® are approved in the U.S., and not solely used for HIV-associated facial wasting.

RESTYLANE™

In December 2003, the FDA approved Restylane™, which is a crystal-clear, biodegradable non-animal stabilized hyaluronic acid (NASHA) gel, which is injected into the dermis in tiny amounts with a very fine needle. The result is instantaneous producing a long-lasting natural enhancement that is gentle and safe to the skin. As it is free from animal substances, the risk of transmitting diseases from other species is completely eliminated. After injection, this type of filler generally remains for 6 to 12 months after the procedure.

SCULPTRA®

In August 2004, the FDA approved Sculptra® which has the distinction of being the first approved filler for HIV facial wasting. Sculptra® (poly-L lactic acid), formerly known as New-Fill, is a synthetic product used for the restoration and/or correction of the signs of facial fat loss due to HIV-related lipoatrophy. It has been evaluated for safety and effectiveness, but side effects may include the delayed appearance of small bumps under the skin in the treated area. They may with treatment disappear over time, but not always.

RADIESSE®

In December 2006, the FDA approved a new filler, Radiesse® for the treatment of HIV-related facial wasting. Radiesse® is a semi-solid gel that contains a chemical called calcium hydroxyapatite (a component of bone and teeth) and works by stimulating the production of collagen to fill in hollowed out areas of skin. Other benefits include its safety and compatibility with the body, it produces a soft and natural-looking appearance, can be performed during an office visit and last significantly longer than most other treatments.

"...an outward appearance of illness can cause severe psychological distress, which could have further adverse effects on a person's well being and health."

COST AND INSURANCE COVERAGE

For many HIV-positive people with facial wasting, the cost of treatment and the expertise required to administer them can be prohibitively expensive. Most single treatments will cost over $1000 and some will require re-treatments. Unfortunately, most private insurance companies, Medicaid, and ADAP (AIDS Drug Assistance Program) do not provide coverage for these treatments. While a few people have been able to convince their insurance carriers to pay for facial fillers, most companies classify them as cosmetic procedures rather than necessary restorative therapies.

The good news is that there is one company Dermik® Laboratories that has reimbursement allowances that are being offered on a sliding scale so that the cost of treatment to qualifying patients with Sculptra® is minimal.

Treatment of facial lipoatrophy with facial augmentation fillers would be similar to, after years of appeals and litigation, the way most insurance companies now reimburse for breast reconstruction following breast cancer surgery. However, this is the type of issue that will need people to contact their legislators as well as insurance carriers to request and/or demand that these procedures be a part of their medical benefits coverage.

With increased advocacy by patients, groups, and the medical community, it is hoped that insurance companies will eventually accept these treatments as a necessary restorative treatment for HIV-positive people with facial lipoatrophy.

As with any medical procedures, we advise that before pursuing any facial augmentation you discuss with a physician which option would be most appropriate based on your individual situation, and address any post-treatment concerns.

Many thanks to the Brooklyn, NY office of Dr. N. Patrick Hennessey, M.D. for providing some of the commonly used fillers for facial wasting photographed by Jim Carroll.

Morning After

Calvin Klein Home - Breakfast tray $125, West Elm - Bleached bamboo mat $6, Plate $10, Mono Flatware $145 (set), Calvin Klein Home - Glass bowls $30, Bookas of Sweden - Espresso & Egg cups (set) $60, MoMA - Place card holder (set) $40

"add Luxe to your Life"

BYRON BARNES, EDITOR-IN-CHIEF

Oil Reserve

Assorted Olive oils $20-$40 (olio2go.com)

Photography by **Luiz Antonio**
Stylist **Lorenzo McCain**

Get Fresh

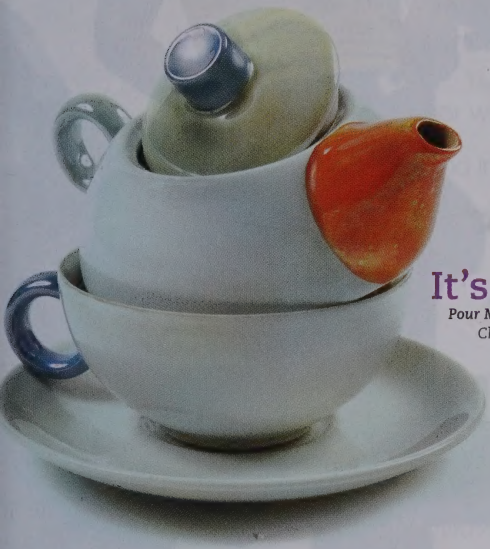
Perlier Bagno al Mughetto *- Lily of the Valley foam bath gel 16.9 fl. oz. $15,* ***Marimekko****, Cotton towel $32*

It's All About Hue

Benjamin Moore *Color Preview swatches, Paint (per gallon)* $45

Something in the Air

Nectaire, *Reed diffuser* $20



It's The "T"

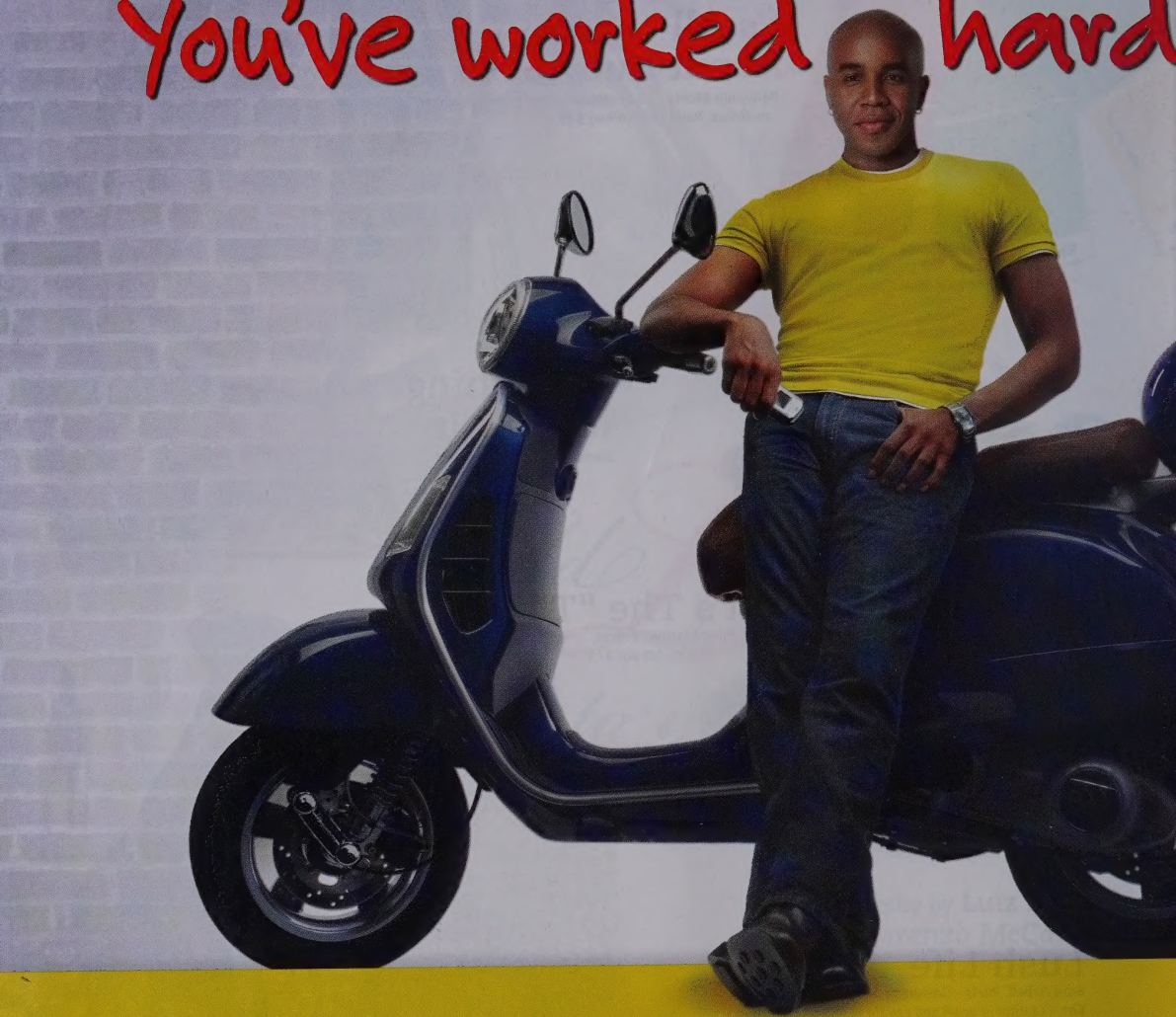
Pour Mariage Frères, *China tea pot* $75

Lush Life

Rain Arbell, Paris - *Cashmere blanket* $1200, **West Elm** - *Mother of pearl and sequin pillows* $30 *each, Place mat* $8, **Michael C. Fina** - *Rosenthal white plate* $36, **Marc** - *Glass bowl* $25, **Tiffany & Co.** - *Spoon* $95, **WW.Daad.De** - *Travel Clock* $60

In combination with other antiretroviral agents for the treatment of HIV-1 infection in adults

You've worked hard



TRUVADA® does not cure HIV infection or lower your chance of passing HIV-1 to others and must be used as part of combination therapy. **TRUVADA should not be used with VIREAD®, EMTRIVA®, Combivir®, Epivir®, Epivir-HBV®, Epzicom™, or Trizivir®.**

USE OF TRUVADA:

TRUVADA is indicated in combination with other antiretroviral agents (such as nonnucleoside reverse transcriptase inhibitors or protease inhibitors) for the treatment of HIV-1 infection in adults.

GILEAD

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IMPORTANT SAFETY INFORMATION:

- **Lactic acidosis** (a buildup of acid in the blood) can be a medical emergency and may need to be treated in the hospital. Call your healthcare provider right away if you have nausea, vomiting, unusual muscle pain, and/or weakness
- **Serious liver problems** (hepatotoxicity), with liver enlargement (hepatomegaly) and fat in the liver (steatosis), may occur. **Call your healthcare provider right away** if you have light colored stools, dark colored urine, and/or if your skin or the whites of your eyes turn yellow
- **Flare-ups of hepatitis B virus (HBV) infection:** If you have HIV and HBV, your liver disease may suddenly get

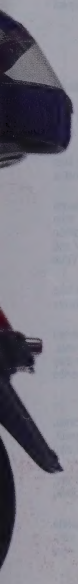
to get where you are.

So why settle for an HIV med that's twice a day?

Once-a-day TRUVADA® can help get you to undetectable and keep you there. As part of an HIV regimen, the meds in TRUVADA:

- Can be taken with or without food
- Reduce viral load and increase CD4 cell count

Ask your doctor how TRUVADA can be part of a complete once-a-day regimen.



Truvada®

200 mg emtricitabine · tenofovir disoproxil fumarate 300 mg

Move On With Life

TRUVADA is the #1 Prescribed HIV Med*

worse if you stop taking TRUVADA. Do not stop taking TRUVADA unless directed by your healthcare provider

- **Kidney problems:** If you have had kidney problems or take other medicines that can cause kidney problems, your healthcare provider should do regular blood tests to check your kidneys
- **Bone changes:** It is not known whether long-term use of TRUVADA causes damage to your bones. If you have had bone problems in the past, talk to your healthcare provider before taking TRUVADA

Changes in body fat have been seen in some people taking anti-HIV medicines. The most common side effects of TRUVADA when taken with other anti-HIV medicines are dizziness, diarrhea, nausea, vomiting, headache, abdominal pain, depression, rash, and gas. Skin discoloration (spots and freckles) may also occur.

Discuss all medicines you take with your healthcare provider and be aware:

- Your healthcare provider may need to follow you more closely or adjust your therapy if you are taking Videx®, Videx® EC, Reyataz®, or Kaletra® with TRUVADA

For more information, please visit **www.truvada.com** or call **1-800-GILEAD-5 (1-800-445-3235)** and select option 2. **There is additional information about TRUVADA on the next page.**

*Based on data from PHAST retail monthly data; April 2006–June 2006; Wolters Kluwer Health.

Patient Information

TRUVADA® (tru-VAH-dah) Tablets

Generic name: emtricitabine and tenofovir disoproxil fumarate
(em tri SIT uh bean and te NOE' fo veer dye soe PROX il FYOU mar ate)

Read the Patient Information that comes with TRUVADA before you start taking it and each time you get a refill. There may be new information. This information does not take the place of talking to your healthcare provider about your medical condition or treatment. You should stay under a healthcare provider's care when taking TRUVADA. **Do not change or stop your medicine without first talking with your healthcare provider.** Talk to your healthcare provider or pharmacist if you have any questions about TRUVADA.

What is the most important information I should know about TRUVADA?

- **Some people who have taken medicine like TRUVADA (nucleoside analogs) have developed a serious condition called lactic acidosis** (build up of an acid in the blood). Lactic acidosis can be a medical emergency and may need to be treated in the hospital. **Call your healthcare provider right away if you get the following signs or symptoms of lactic acidosis.**
  - You feel very weak or tired.
  - You have unusual (not normal) muscle pain.
  - You have trouble breathing.
  - You have stomach pain with nausea and vomiting.
  - You feel cold, especially in your arms and legs.
  - You feel dizzy or lightheaded.
  - You have a fast or irregular heartbeat.
- **Some people who have taken medicines like TRUVADA have developed serious liver problems called hepatotoxicity,** with liver enlargement (hepatomegaly) and fat in the liver (steatosis). **Call your healthcare provider right away if you get the following signs or symptoms of liver problems.**
  - Your skin or the white part of your eyes turns yellow (jaundice).
  - Your urine turns dark.
  - Your bowel movements (stools) turn light in color.
  - You don't feel like eating food for several days or longer.
  - You feel sick to your stomach (nausea).
  - You have lower stomach area (abdominal) pain.
- **You may be more likely to get lactic acidosis or liver problems** if you are female, very overweight (obese), or have been taking nucleoside analog medicines, like TRUVADA, for a long time.
- **TRUVADA is not for the treatment of Hepatitis B Virus infection (HBV).** Patients infected with both HBV and human immunodeficiency virus (HIV) who take TRUVADA need close medical follow-up for several months after stopping treatment with TRUVADA. Follow-up includes medical exams and blood tests to check for HBV that could be getting worse. **Patients with Hepatitis B Virus infection, who take TRUVADA and then stop it, may get "flare-ups" of their hepatitis. A "flare-up" is when the disease suddenly returns in a worse way than before.**

What is TRUVADA?

TRUVADA is a type of medicine called an HIV (human immunodeficiency virus) nucleoside analog reverse transcriptase inhibitor (NRTI). TRUVADA contains 2 medicines, EMTRIVA® (emtricitabine) and VIREAD® (tenofovir disoproxil fumarate, or tenofovir DF) combined in one pill. TRUVADA is always used with other anti-HIV medicines to treat people with HIV infection. TRUVADA is for adults age 18 and older. TRUVADA has not been studied in children under age 18 or adults over age 65.

HIV infection destroys CD4 (T) cells, which are important to the immune system. The immune system helps fight infection. After a large number of T cells are destroyed, acquired immune deficiency syndrome (AIDS) develops.

TRUVADA helps block HIV reverse transcriptase, a chemical in your body (enzyme) that is needed for HIV to multiply. TRUVADA lowers the amount of HIV in the blood (viral load). TRUVADA may also help to increase the number of T cells (CD4 cells). Lowering the amount of HIV in the blood lowers the chance of death or infections that happen when your immune system is weak (opportunistic infections).

TRUVADA does not cure HIV infection or AIDS. The long-term effects of TRUVADA are not known at this time. People taking TRUVADA may still get opportunistic infections or other conditions that happen with HIV infection. Opportunistic infections are infections that develop because the immune system is weak. Some of these conditions are pneumonia, herpes virus infections, and *Mycobacterium avium complex* (MAC) infection. **It is very important that you see your healthcare provider regularly while taking TRUVADA.**

TRUVADA does not lower your chance of passing HIV to other people through sexual contact, sharing needles, or being exposed to your blood. For your health and the health of others, it is important to always practice safer sex by using a latex or polyurethane condom or other barrier to lower the chance of sexual contact with semen, vaginal secretions, or blood. Never use or share dirty needles.

Who should not take TRUVADA?

- Do not take TRUVADA if you are allergic to TRUVADA or any of its ingredients. The active ingredients of TRUVADA are emtricitabine and tenofovir DF. See the end of this leaflet for a complete list of ingredients.
- Do not take TRUVADA if you are already taking COMBIVIR®, EMTRIVA, EPIVIR®, EPIVIR-HBV®, EPZICOM™, TRIZIVIR®, or VIREAD because these medicines contain the same or similar active ingredients.

What should I tell my healthcare provider before taking TRUVADA?

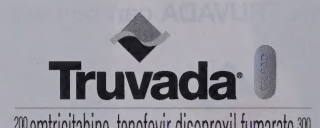
Tell your healthcare provider if you:

- **are pregnant or planning to become pregnant.** We do not know if TRUVADA can harm your unborn child. You and your healthcare provider will need to decide if TRUVADA is right for you. If you use TRUVADA while you are pregnant, talk to your healthcare provider about how you can be on the TRUVADA Antiviral Pregnancy Registry.
- **are breast-feeding.** You should not breast feed if you are HIV-positive because of the chance of passing the HIV virus to your baby. Also, it is not known if TRUVADA can pass into your breast milk and if it can harm your baby. If you are a woman who has or will have a baby, talk with your healthcare provider about the best way to feed your baby.
- **have kidney problems or are undergoing kidney dialysis treatment.**
- **have bone problems.**
- **have liver problems including Hepatitis B Virus infection.**

Tell your healthcare provider about all the medicines you take, including prescription and non-prescription medicines, vitamins, and herbal supplements Especially tell your healthcare provider if you take:

- Drugs that contain didanosine (VIDEX®, VIDEX EC®). Tenofovir DF (a component of TRUVADA) may increase the amount of VIDEX in your blood. **You may need to be followed more carefully if you are taking TRUVADA and VIDEX together.**
- REYATAZ™ (atazanavir sulfate) or KALETRA® (lopinavir/ritonavir). These medicines may increase the amount of tenofovir DF (a component of TRUVADA) in your blood, which could result in more side effects. You may need to be followed more carefully if you are taking TRUVADA and REYATAZ or KALETRA together.

Keep a complete list of all the medicines that you take. Make a new list when medicines are added or stopped. Give copies of this list to all of your healthcare providers and pharmacist **every** time you visit your healthcare provider or fill a prescription.



How should I take TRUVADA?

- Take TRUVADA exactly as your healthcare provider prescribed it. Follow the directions from your healthcare provider, exactly as written on the label.
- The usual dose of TRUVADA is 1 tablet once a day. TRUVADA is always used with other anti-HIV medicines. If you have kidney problems, you may need to take TRUVADA less often.
- TRUVADA may be taken with or without a meal. Food does not affect how TRUVADA works. Take TRUVADA at the same time each day.
- If you forget to take TRUVADA, take it as soon as you remember that day. **Do not** take more than 1 dose of TRUVADA in a day. **Do not** take 2 doses at the same time. Call your healthcare provider or pharmacist if you are not sure what to do. **It is important that you do not miss any doses of TRUVADA or your anti-HIV medicines.**
- When your TRUVADA supply starts to run low, get more from your healthcare provider or pharmacy. This is very important because the amount of virus in your blood may increase if the medicine is stopped for even a short time. The virus may develop resistance to TRUVADA and become harder to treat.
- Do not change your dose or stop taking TRUVADA without first talking with your healthcare provider. Stay under a healthcare provider's care when taking TRUVADA.
- If you take too much TRUVADA, call your local poison control center or emergency room right away.

What should I avoid while taking TRUVADA?

- **Do not breast-feed.** See "What should I tell my healthcare provider before taking TRUVADA?"
- **Avoid doing things that can spread HIV infection** since TRUVADA does not stop you from passing the HIV infection to others.
  - **Do not share needles or other injection equipment.**
  - **Do not share personal items that can have blood or body fluids on them, like toothbrushes or razor blades.**
  - **Do not have any kind of sex without protection.** Always practice safer sex by using a latex or polyurethane condom or other barrier to reduce the chance of sexual contact with semen, vaginal secretions, or blood.
- COMBIVIR, EMTRIVA, EPIVIR, EPIVIR-HBV, EPZICOM, TRIZIVIR, or VIREAD. **TRUVADA should not be used with these medicines.**

What are the possible side effects of TRUVADA?

TRUVADA may cause the following serious side effects (see "What is the most important information I should know about TRUVADA?"):

- **Lactic acidosis** (buildup of an acid in the blood). Lactic acidosis can be a medical emergency and may need to be treated in the hospital. **Call your doctor right away if you get signs of lactic acidosis.** (See "What is the most important information I should know about TRUVADA?")
- **Serious liver problems (hepatotoxicity),** with liver enlargement (hepatomegaly) and fat in the liver (steatosis). Call your healthcare provider right away if you get any signs of liver problems. (See "What is the most important information I should know about TRUVADA?")
- **"Flare-ups" of Hepatitis B Virus infection,** in which the disease suddenly returns in a worse way than before, can occur if you stop taking TRUVADA. Your healthcare provider will monitor your condition for several months after stopping TRUVADA if you have both HIV and HBV infection. TRUVADA is not for the treatment of Hepatitis B Virus infection.
- **Kidney problems** If you have had kidney problems in the past or take other medicines that can cause kidney problems, your healthcare provider should do regular blood tests to check your kidneys.
- **Changes in bone mineral density (thinning bones)** It is not known whether long-term use of TRUVADA will cause damage to your bones. If you have had bone problems in the past, your healthcare provider may need to do tests to check your bone mineral density or may prescribe medicines to help your bone mineral density.

Other side effects with TRUVADA when used with other anti-HIV medicines include:

- Changes in body fat have been seen in some patients taking TRUVADA and other anti-HIV medicines. These changes may include increased amount of fat in the upper back and neck ("buffalo hump"), breast, and around the main part of your body (trunk). Loss of fat from the legs, arms and face may also happen. The cause and long term health effect of these conditions are not known at this time.

The most common side effects of EMTRIVA or VIREAD when used with other anti-HIV medicines are: dizziness, diarrhea, nausea, vomiting, headache, rash, and gas. Skin discoloration (small spots or freckles) may also happen with TRUVADA.

These are not all the side effects of TRUVADA. This list of side effects with TRUVADA is **not complete** at this time because TRUVADA is still being studied. If you have questions about side effects, ask your healthcare provider. Report any new or continuing symptoms to your healthcare provider right away. Your healthcare provider may be able to help you manage these side effects.

How do I store TRUVADA?

- **Keep TRUVADA and all other medicines out of reach of children.**
- Store TRUVADA at room temperature 77 °F (25 °C).
- Keep TRUVADA in its original container and keep the container tightly closed.
- Do not keep medicine that is out of date or that you no longer need. If you throw any medicines away make sure that children will not find them.

General information about TRUVADA:

Medicines are sometimes prescribed for conditions that are not mentioned in patient information leaflets. Do not use TRUVADA for a condition for which it was not prescribed. Do not give TRUVADA to other people, even if they have the same symptoms you have. It may harm them.

This leaflet summarizes the most important information about TRUVADA. If you would like more information, talk with your healthcare provider. You can ask your healthcare provider or pharmacist for information about TRUVADA that is written for health professionals. For more information, you may also call 1-800-GILEAD-5 or access the TRUVADA website at www.TRUVADA.com.

Do not use TRUVADA if seal over bottle opening is broken or missing.

What are the ingredients of TRUVADA?

Active Ingredients: emtricitabine and tenofovir disoproxil fumarate

Inactive Ingredients: Croscarmellose sodium, lactose monohydrate, magnesium stearate, microcrystalline cellulose, and pregelatinized starch (gluten free). The tablets are coated with Opadry II Blue Y-30-10701 containing FD&C Blue #2 aluminum lake, hydroxypropyl methylcellulose 2910, lactose monohydrate, titanium dioxide, and triacetin.

℞ Only

March 2006

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GILEAD

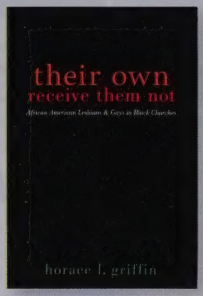
BOOKMARK

*Writer **Justin Hall**, shares his latest picks that peeked our interests. Get your read on!*

Their Own Receive Them Not: *African American Lesbians & Gays in Black Churches*

BY HORACE L. GRIFFIN / *Pilgrim Press*, $24.00

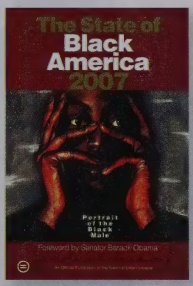
Rev. Horace L. Griffin is black, gay, and grew up in a Missionary Baptist church. Based on his life and church experience, he has witnessed how "black church leaders and congregants have been resistant in, and even closed to, treating gay and heterosexual congregants equally or, in many cases, simply offering compassion to gay people. In his 240-page book, Griffin, an Episcopal priest, attempts to deconstruct the history and legacy of homophobia in the black church using sociological, theological, and biblical lenses. "The black church's teaching that homosexuality is immoral has created a crisis for lesbian and gay Christians in black churches," he writes in his new book.



The State of Black America 2007: *Portrait of the Black Male*

BY NATIONAL URBAN LEAGUE, SENATOR BARACK OBAMA (FOREWORD), STEPHANIE J. JONES (EDITOR) / *Beckham Publications Group*, $14.95

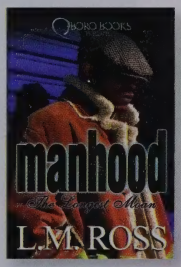
According to the 2007 National Urban League Equality Index, glaring gaps continue to exist between black and white Americans—with a disproportionate impact on black males. In this compilation of essays, some of America's finest minds analyze the causes and effects of these disparities and present targeted recommendations for eliminating them. In the end, readers will understand why, in the words of National Urban League President Marc H. Morial, "Empowering black males to reach their full potential is the most serious economic and civil rights challenge we face today."



Manhood: *The Longest Moan*

BY L.M. ROSS / QBORO/URBAN BOOKS, $14.95

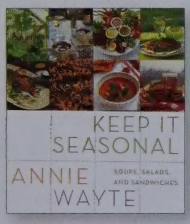
This is a tale of youthful ambition, four cats on a mission to be nothing less than stars. Ty is a writer who pines for love. David is a dancer who burns with lust. Browny is a singer who yearns for the kiss of celebrity. Face is an actor whose role it is to emote the biggest of lies. Together, in the mean and rhythmic streets of New York City, they seek their fame, fortune, and prize. Some want to know of love's ultimate sigh, and some find the rainbow. All find unexpected surprises in a story about dreams, lust, and the meaning of friendship, the test of disease, and the definition of trust.



Keep It Seasonal: *Soups, Salads, and Sandwiches*

BY ANNIE WAYTE / *Morrow Cookbooks*, $29.95

In Keep It Seasonal, acclaimed chef Annie Wayte shows cooks that ingredients that are truly fresh, local, and in season are better tasting and better for you. Think of a fresh, crisp fall apple, a tender spring artichoke, or a juicy summer peach. They're at their peak in flavor and nutrition, and are a lot more affordable than the trucked-in, out-of-season variety. Annie introduces a world of local butchers, bakers, greengrocers, and farmers who are producing fresh, flavorful food. And that kind of quality is always in season.

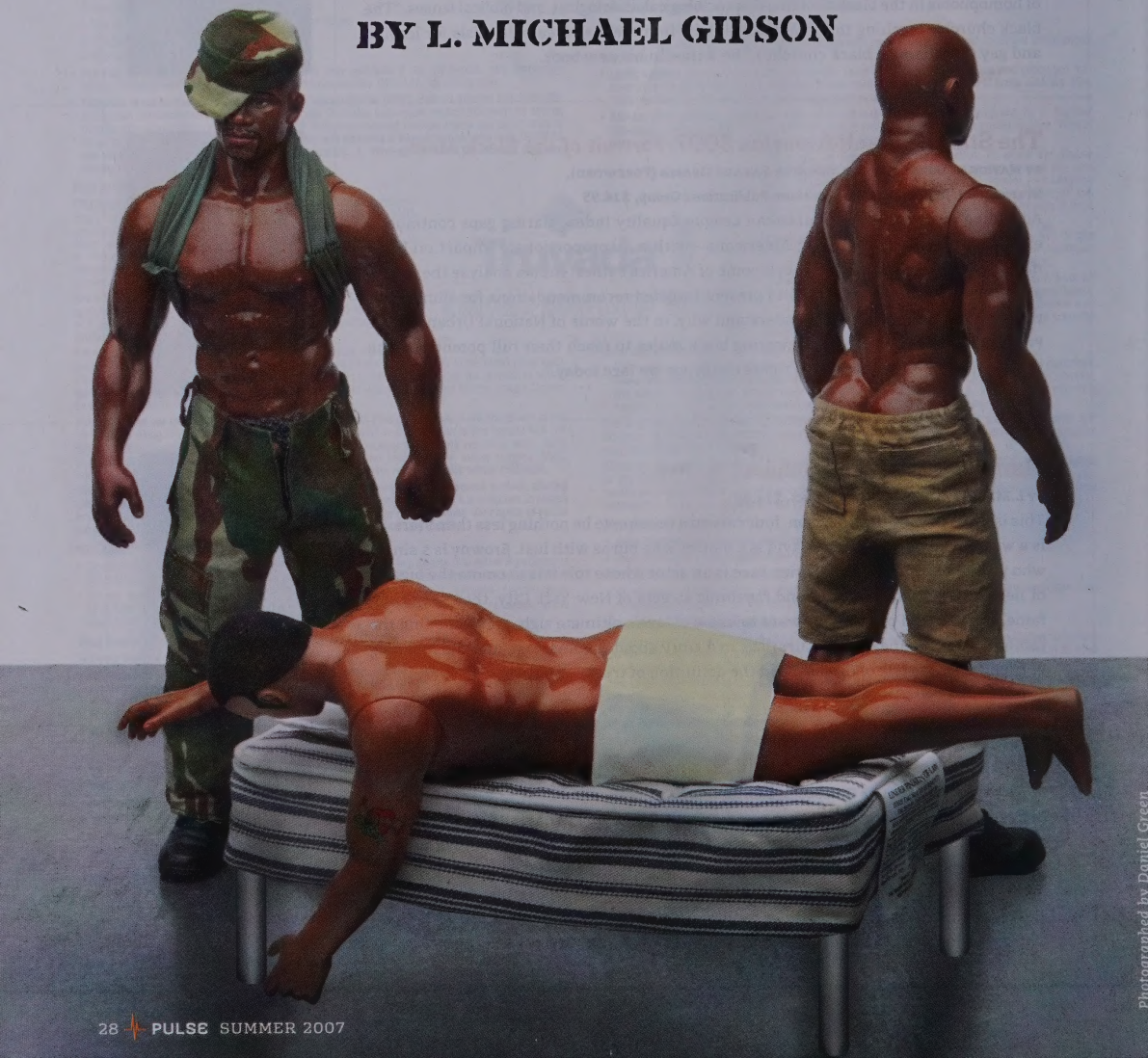


GAY BARS

EX-INMATES TALK ABOUT LIFE ON LOCKDOWN

A SPECIAL REPORT

BY L. MICHAEL GIPSON



Photographed by Daniel Green

"In prison you are told when to eat, sleep, and wash your butt. You're surrounded by criminals who will test you, try to fight and steal from you among other things." said Rico, 32, a former black gay inmate.

There are an estimated 2.3 million Americans incarcerated in America's prisons, the majority of whom are Black. It is safe to deduce that a disproportionately high number of gay men of color are likely to reside in these prisons at some point in their lives. Statistics like these and frequent news reports about wrongly convicted persons are causing some black men to ask questions about prison life. To get a handle on these questions, PULSE reviewed several advocacy reports, court cases, the Prison Rape Elimination Act of 2003 (PREA), PREA data on sexual assault, and interviewed three formerly incarcerated black gay men. Two of the men, both of whom served multiple sentences, agreed to be quoted, and the third provided content about prison survival for this perspective.

"I was very scared the first time," said Keith Williams, 44, a former inmate who between 1984 and 2000 served eight sentences for forgery and grand theft in Ohio and Alabama. Attractive, over six feet, and battling an addiction, Keith managed to survive prison, partially, because of who he was, who he knew, and how he handled himself.

One's survival can depend on where you are and with whom you are incarcerated, and being in your home state or among people you knew on the "outside" can, ultimately, alter your experience. But, for Rico, seeing familiar faces from the outside was no guarantee. According to him, "Knowing people didn't protect me. It just gave me a heads up on what was going on and which individuals not to mess with or groups to hang with." While all men interviewed advocated sticking to yourself, keeping your social circle small, and minimizing trust, these strategies are bet hedgers at best.

Historically, with prison administrators' propensity to give openly gay men gatekeeper positions (based on antiquated notions of temperament), it was once said that gays "ran the prisons." However; in 1993, researcher Stephen Donaldson noted that "homophobia in prisons had risen and the status of queens had fallen...." In most states, genitalia-based classification is how transgender inmates are designated prisons and quarters. Therefore, a pre-op transgender who has breast implants and undergone hormone therapy is often times assigned to the general population. Such assignments usually engender multiple opportunities for rape, harassment, coerced sex, and forced prostitution.

More oppressive prisons, not upholding prisoner's rights, tend to have higher incidents of rape, beatings, and inmate murder. According to Keith, "Being a black gay man in Alabama, you were more discriminated against than in Ohio. You were more watched, limited in what you could do, and the places you could go." Regardless of education, "...you had to bust rock down to gravel." Schooling had an advantage, though. "In Ohio, if they realized you could be an asset and do their work they used you...." Keith stated.

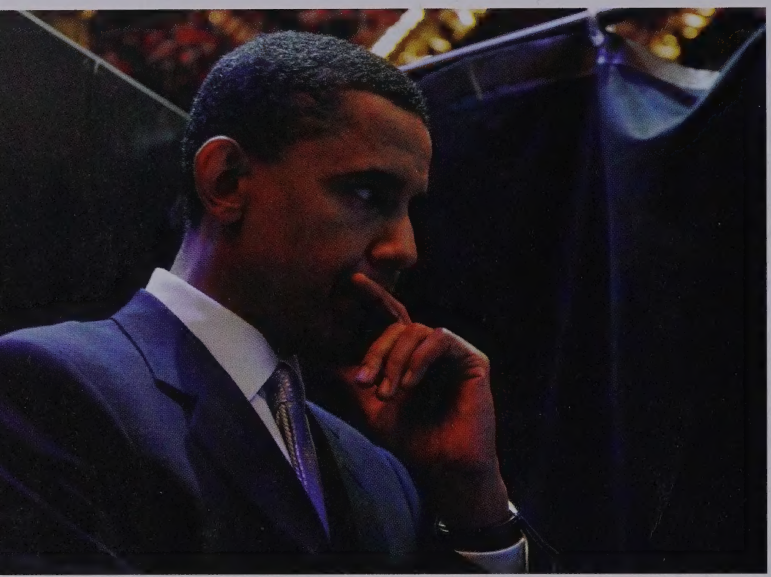
In unruly prison dorms, comparing the HBO series, Rico says "People sneak drugs, men have sex with men, people get stabbed, jumped, cut; they are always fighting just like in the TV show Oz." However, perpetrators of rape and sexual assault aren't always other inmates. According to 2005 PREA statistics, of all reported sexual misconduct allegations, 38% involved prison staff. In California's Corcoran correctional facility, several guards were charged with setting up inmate rapes for Warren "Booty Bandit" Robinson, a prisoner known to beat and forcibly sodomize other prisoners for extra food and tennis shoes.

Prison rape is less about attraction and sexual release, and more about asserting power and dominance. Consequently, small, young, and more effeminate guys are more likely to be targeted as are older, unattractive, and big men. In order not to be victimized, a new inmate must leave no doubt about his willingness to defend his manhood. At only 5'8", handsome with a butterscotch complexion, Rico states that he didn't get raped.

"SOME GAY MEN LOOK FOR AND WELCOME SEX WITH OTHER INMATES, SOMETIMES OUT OF DESIRE, BUT ALSO AS A STRATEGY FOR AVOIDING VICTIMIZATION OR TO GUARANTEE PROTECTION."

According to the Human Rights Watch, Rico's experience isn't the rule. Many victims are repeatedly harassed, verbally assaulted, and raped five to six times. Victims would vehemently fight attackers before tiring of the battle, eventually, succumbing to being "turned out." Once having surrendered, the victim is labeled as a "homo" or "punk" to be taken advantage of, and, theoretically, an assumed homosexual latency is revealed.

Admittedly, all sex in prison isn't rape. Some gay men look for and welcome sex with other inmates, sometimes out of desire, but also as a *(cont'd on page 94)*



The Road Less Traveled.

★★★★★★★★★★★★★★★★★★★★★★★★★

Barack Obama makes serious bid for The White House.

★★★★★★★★★★★★★★★★★★★★★★★★★

A PULSE Exclusive Interview
by Tokes M. Osubu and Robert E. Crawford

***Q:** In Europe, gays in the military are not a problem but are still banned from serving openly in the U.S. military. How do you plan to eliminate discrimination based on sexual orientation against individuals who are willing and capable candidates to serve their country?*

OBAMA: I fully support the repeal of the "Don't Ask, Don't Tell" policy. The key test for military service should be patriotism, a sense of duty, and a willingness to serve. We also have evidence that "Don't Ask, Don't Tell" is not working. A 2005 GAO report found that the policy has resulted in a significant loss of service members in critical occupations and with important language skills like Arabic and Korean. Former Chairman of the Joint Chiefs of Staff General John Shalikashvili said times have changed and that, "I now believe that if gay men and lesbians served openly in the United States military, they would not undermine the efficacy of the armed forces." These assessments confirm what military leaders in other parts of the world, including Europe, have found.

***Q:** Nationally, our inner cities are facing challenges that have reached abysmal proportions. One challenge is represented in the number of young Black and Latino males who are dropping out of high school. With President Bush's initiative of "No Child Left Behind," the dropout rates are still increasing and a new underclass is developing of young Black and Latino males. How do you propose to turn this crisis in education around?*

OBAMA: The achievement gap is a problem across the country. At 21%, the national Latino high school dropout rate is more than twice the national average. In some cities, more than half of all black boys do not finish high school.

To tackle this problem, the first thing we have to do is close the gap that exists between children before they enter kindergarten by providing high-quality preschool opportunities to all children. Far too few Latino and African-American children are enrolled in early childhood education programs, despite the proven successes of such programs. As president, I will increase funding for Head Start and Early Head Start and expand access to Pre-K.

Another step toward closing this gap is to attract talented teachers to our inner cities and other high-needs areas. We know that low-income and minority students are disproportionately taught by teachers who have less experience than teachers in other schools. My plan to attract and retain high-quality teachers in high-needs districts will go a long way toward closing this gap. I introduced the Teaching Residency Act, which recently passed the Senate Health, Education, Labor, and Pensions Committee. My bill will provide grant funding for prospective teachers to serve residencies with school districts similar to other professional fields like medicine, provide stipends for teachers-in-training in exchange for a commitment to continue teaching in that school once they are finished with their program, and provide much-needed funding for specialized training of new teachers in high-needs districts.

To further reduce the drop-out rate and close the achievement gap, it is also important to make sure that we provide

after-school programs and summer learning opportunities to disadvantaged and minority students. As president, I will ensure that we continue to work to close the achievement gap during those months when school is not in session. My "STEP UP" plan supports summer learning opportunities, with curricula that emphasize mathematics and problem solving, by offering competitive state grants to support summer term education programs.

Q: *The level of homelessness among gay youth across the country is at crisis levels, due in part to sexual abuse and violence against teens suspected of being gay. Consequently, we are seeing a generation of kids who are spending their formative years living on the streets, without the support of family or community. What would an Obama Presidency do to reverse this?*

OBAMA: Recent estimates show that while gay men and lesbians make up 3-5% of the general population, they account for more than 20% of homeless youths under age 21 in many urban areas. Many of these youth have attempted suicide. We know that these young men and women face tremendous difficulties growing up including rejection from families, harassment, violence from peers, rejection by adults, HIV risks, and substance abuse.

I believe we have to do more to ensure that we have adequate resources and support structures to nourish and encourage gay and lesbian youth, as well as all young people. Despite the prevalence of homelessness among all youth in this country, we've witnessed cuts in funding for the Runaway and Homeless Youth Act over the last few years. And funding for the Community Development Block Grant program has declined 15% since fiscal year 2001—funds that can be used, among other things, to support homeless shelters. As president, I will fund these programs and ensure that we have adequate funding and support for homeless youth.

Additionally, I will work to strengthen our law enforcement efforts so that gay and lesbian youth do not find themselves victims of sexual and violent crimes. In 2004, crimes against LGBT Americans constituted the third-highest category of hate crime reported and made up more than 15% of such crimes. I am an original co-sponsor of federal legislation that adds sexual orientation, gender, gender identity, and disability to existing federal law that gives authority to the federal government to investigate and prosecute violent crimes. As a state senator, I passed tough legislation that made hate crimes and conspiracy to commit them against the law.

Q: *The Healthcare system is homophobic against gay persons and it has come to a point where treatments, doctor's visits, and medications are not affordable by persons who have HIV/AIDS. How do you plan to address this issue?*

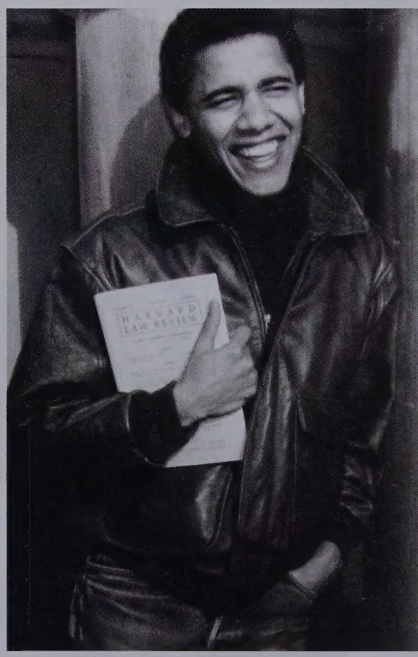
OBAMA: The Ryan White Care Act (RWCA) provides access to life-saving treatment and care for over half a million low-income Americans with HIV/AIDS. We must continue to fund this vital program. Throughout the reauthorization process for RWCA, I worked closely with RWCA service providers, the Chicago Department of Public Health, and the Illinois Department of Public Health to analyze and find ways to improve the program for Illinois and for the nation. I will continue to fight to ensure that life-saving medications and treatments are affordable to patients with HIV/AIDS.

In this campaign, I have also proposed a universal healthcare plan that would make health insurance affordable for all Americans. I will create a new national health program that will allow individuals and small businesses to buy affordable healthcare similar to that available to federal employees. No one will be turned away or charged more due to illness, and everyone who needs it will receive a subsidy for their premiums. I will also create a National Health Insurance Exchange to reform the private insurance market. Any American could enroll in participating private plans, which would have to provide comprehensive benefits, issue every applicant a policy, and charge fair and stable premiums. Thus, under my plan, insurers will no longer be able to "cherry pick" which services/treatments to cover or to discriminate against certain pre-existing treatments.

Q: *Lately, there have been calls for the elimination of the N and B words, especially in music and in the media. The "F" word (faggot or fag) is just as derogatory and offensive, but no one is calling for its elimination. What is your position on this double standard and on what it says about how gays and lesbians are perceived?*

OBAMA: I find the "F word" just as reprehensible as the "N and B words"—it too has no place in a tolerant America. We have witnessed a coarsening of our culture that we all have to think about. The entertainment industry has played some role in this, but in many ways we have to accept personal responsibility and begin to condemn discriminatory and derogatory insults, wherever they may arise.

Tokes M. Osubu is the Executive Director of Gay Men of African Descent. Robert E. Crawford is the Associate Publisher for PULSE Magazine.



Signature WATER

by Zulekha Haywood

Summer heat brings people outdoors in droves for festivals, carnivals, and coastal retreats. The rising mercury amps up the body's natural thirst for a cool beverage, but before you sip another mojito, consider this: Over half of your body's composition is made of water (not tequila!), and your body needs about 64 ounces per day to function properly and flush out toxins. Furthermore, hydrated skin has a naturally luscious glow that can't be duplicated with any amount of bronzer. So, whether breaking a sweat at a free concert or soaking up sun poolside, take a breather from endless icy-cold alcoholic and caffeinated concoctions. Keep it simple with a bottle of water. Now, that's a cold one bursting with rewards!

FIJI®
Natural artesian still water
(Fiji Islands, since 1996), 1 L. $2.69.
FIJIWATER.COM

GLACÉAU VITAMINWATER®
Nutrient-enhanced flavored water
(U.S., since 1996), 591 ml. $1.69.
ENERGYBRANDS.COM

VOSS®
Natural artesian still water
(Norway, since 1998), 500 ml.$1.99
VOSSWATER.COM

SOUROTI®
Natural sparkling mineral water
(Greece, since 1916), 750 ml. $1.49.
SOUROTI.GR

SCHWEPPES®
Seltzer, carbonated water
(England, since 1783), 1 L.$1.49.
SCHWEPPES.COM

Corey, Identities Inc. photographed by **Tarrice Love**
Waters photographed by **Luiz Antonio**
Styled by **Llewellyn Jenkins**
Grooming by **Douglas Snuggs**

GAYBONICS

BY TERENCE TAITT *Back in the day there was a time, before thug realness, gangsta rap, online dating, and top/bottom issues, when men just met at a bar or club, went home, and "worked IT out!" The lifestyle was considered a subversive way to live, so a vernacular developed over the years equally subversive and often quite difficult to decipher. Gay men became savvier in their ways of communicating with each other, to where an outsider or novice was unable to follow a conversation in Gaybonics.*

This gay form of street jargon took on a life all its own. Questions asked such as "You got trade?" "Do you date bangees?" "Want one of my party vitamins?" and the like determined compatibility—a verbal gaydar, if you will. Throughout the years, there has been an underground language amongst the gay Blatino community, a 'gay-ebonics' (gb), that is so diverse from different regions that our PULSE editors decided to share this with our readers. Here are just a few commonly used terms—some old, others new. Please feel free to add your own to our dictionary.

ALICE *(n-gb)*: Government official who keeps order, safety, and enforces the law; the police. *(syn-gb)*: Mag, PoPo, Judy Justice, Hamburger, Five-O.

BANGEE *(adj-gb)*: Term used to describe anyone or anything with an inner-city appearance or disposition; ghetto.

BUTCH QUEEN *(n-gb)*: Any gay man with a hyper-masculine appearance.

CARTA *(n-gb)*: The front part of the head; the face; e.g., "that boy is fine, he has major carta." *(syn-gb)*: structure.

COINS *(n-gb)*: A term used for currency, money, or deep pockets. *(syn-gb)*: ducats, pearls, chips, lire. Also, coinage.

CRAFT *(n-gb)*: Any form of stealing or misappropriation of merchandise without right or permission. See also: mop *(syn-gb)*: clean, mopping.

DOO LA LA *(adj-gb)*: A term used to describe what a person is wearing, a fashionable outfit *(syn-gb)*: labels, pieces, drag, closet.

FEM QUEEN *(n-gb)*: Any gay man with feminine appearance or demeanor.

GAG *(v-gb)*: To be at a loss for words or to be rendered speechless; e.g., "They gagged when they saw my outfit."

GILDA *(n-gb)*: A wig, usually an obvious one.

JUDY *(n-gb)*: A term given to a good female friend *(syn-gb)*: sister, daughter, good girlfriend (GGF).

KEE-KEE *(v-gb)*: To find amusement in something to the point of uproarious laughter; joking around with friends.

LEGENDARY *(adj-gb)*: To be iconic and instantly recognizable on the Ball scene.

MASH *(v-gb)*: To have sex. *(syn-gb)*: knock-down, session, service, swirl.

(THE) MONSTER *(n-gb)*: A derogatory term referring to the HIV virus. *(syn-gb)*: the package, the service, the giggles, Agnes.

PARTY 'N' PLAY (PNP) *(n-gb)*: use of crystal methamphetamine as part of sexual encounter(s).

PEED *(v-gb)*: To outdo oneself; excel at something while leaving others way behind you.

READ *(v-gb)*: To be told about yourself; also to lose in an argument; e.g., "My boss got on my nerves, I had to read him."

SEED *(adj-gb)*: A low form of anything, esp. pertaining to sex, but may also be used to describe the cheapness of one's appearance; e.g., "Yeah, I saw her last night. Her gilda was Seed."

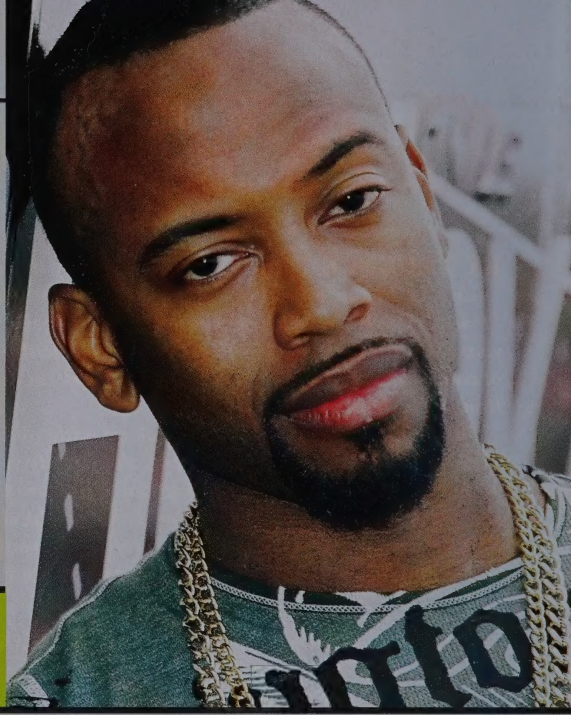
SERVE *(v-gb)*: A ballroom term for exciting a crowd the crowd or those around you. One can also be Served *(v-gb)*: meaning you were 'one-upped' or taken advantage of.

SHADE *(n-gb)*: Any form of negativity with regard to communication or action; e.g., "I spoke to him, but he didn't speak back; she was throwing shade."

TRADE *(n-gb)*: 1. A man who has sex with men for pay. 2. An expression denoting the male genitalia, usually large; e.g., "My date last night had traaaaade!" *(syn-gb)*: piece, wood, meat, pipe, bam bam ma wango.

TRANNIE *(n-gb)*: Usually refers to a transsexual, but also used to refer to transvestites.

VOGUE *(v-gb)*: A form of dance, developed by Black and Latin men in NYC, often competitive; involves exaggerated poses (old way) and dramatic falls (new way).



TONÈX
Stereotype: Steel and Velvet
Nureau Ink/Zomba

●●●●◖ Pulse Pts

Tonèx is the sangingest man in the industry. Now, with *Stereotype: Steel and Velvet*, he offers 2-discs of gospel/rock/R&B/hip-hop bangers; party tunes (*steel*) and melodic soulful and jazz-influenced ballads (*velvet*). The gospel/soul force of nature flexes his full range! His amazing tenor, which soars and runs like no other, holds it all together!

Non-Stop Pop
by Kevin E. Taylor

JILL SCOTT
The Real Thing
Hidden Beach

●●● Pulse Pts

Jill Scott's newest release, *The Real Thing*, and its soulfunky first single "Hate On Me" returns Jill to the sassy, soul sistahtude that originally made us take notice. On The Real Thing, she's forceful, poetic, and independent, celebrating her man and love!

BJ CROSBY
Best Of Your Heart
Crosell

●●●◖ Pulse Pts

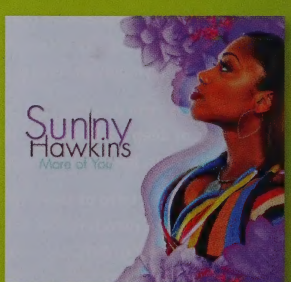
Every diva is doing standards (Natalie Cole, Deniece Williams, and Vanessa Williams, et al.), but none of them have the bawdy, ballsy vocals of Broadway diva BJ Crosby. From Stevie Wonder to Betty Carter, with some originals thrown in for balance, BJ sounds better than ever!

KEITE YOUNG
The Rise and Fall of Keite Young
Hidden Beach

●●● Pulse Pts

An original member of Kirk Franklin's group The Family, Keite Young with his debut CD *The Rise and Fall of...* has branched OUT! "If We Were Alone" (with N'Dambi) and "U Got It" are soulful-sexy; and the conflicted-but-not-really "Alright" ventures into Marvin Gaye/Prince territory (sensual/spiritual soul music). Keite emerges as One To Watch!

Kevin E. Taylor, is the author of JADED and a media producer for BET J. KevinETaylor.com



Also PULSING...
NEW MUSIC from Sunny Hawkins "More of You" (married into the Hawkins Family a la Vickie Winans), and professor Dr. Cornel West expanding minds with a hip-hop groove on "Never Forget: A Journey Of Revelations."

Starstruck

RIHANNA

good girl gone bad

by Kevin E. Taylor

WHEN SHE SASHAYED onto the music scene, Rihanna aka Little Miss *Pon De Replay*, was cute, demure, and not expected to last. Maybe even achieve one-hit wonder status. Her sophomore CD virtually got igged by black radio, but then something wonderful happened. This pretty sexy dancehall girl became a pop sensation. With her single S.O.S. featured in the huge "Nike Rockstar Workout" campaign, Rihanna had a second chance, and with *Unfaithful*, proved that "good girls screw up, too." Now, with *Good Girl Gone Bad* and her sizzling banger *Umbrella*, along with plenty of buzz that keeps her name among the likes of Beyonce and Jay-Z, Rihanna's success proves that artist development is alive and well in the music biz! She's grown up and out, and into herself, giving naughty girls hope that BAD CAN BE GOOD ...and sometimes HOT!

Photo by: Johnny Nuñez

The R Word

RUSSELL STEPS UP!

OUR EDITORS were in hot pursuit of hip-hop entrepreneur and fashion mogul Russell Simmons for answers to PULSE's questions about the release of his new book Do You!, its impact on the gay community, and topics concerning his declaration of being a "gay activist" who's not gay. A ***PULSE Exclusive*** *Interview by* **DAVID P. MARTIN, FRED BROWN, JR. AND ROBERT E. CRAWFORD.**

Q: ***The title of your book is Do You! Where did you get the idea for the title? What does Do You! exactly mean and what do you want to convey to your reader?***

SIMMONS: The name of the book was originally Russell Simmons' Hip-Hop Laws of Success. Then I sent a copy of the galleys to Oprah Winfrey, who thought that the title was "corny," and suggested that I name it after the second chapter, which was Do You! At first my publisher didn't want to change the title, since he had already started printing up covers, but in the end, we decided to go with Oprah's recommendation. And I think it was the right decision.

Essentially, Do You! means always try to listen to what your heart tells you is right, instead of what the world might tell you to do.

Q: ***How do the 12 Laws to Access the Power in You to Achieve Happiness and Success hold up universally and cross-culturally given that each individual's life experiences vastly differ?***

SIMMONS: Our experiences may differ vastly, but at the end of the day, I think we're all much more alike than we are different. My favorite quote in the book comes from the Buddhist monk Thich Nhat Hanh, who said, "We are here to awaken from the illusion of our separateness." That's really such an important thing to remember, that we're all connected. I think we all have that little voice of God inside of us, and when we take the time to listen to it; we can hear that we're all the same. I believe that's why hip-hop has had such a profound affect on this country, because it's created a common ground for the kids in Compton and the kids in Beverly Hills. So I'm hoping that Do You! can take that common ground and build on it.

Q: ***Why was Donald Trump selected to write the introduction to your book?***

SIMMONS: Donald's a good friend of mine who's inspired many people with his successes. Of course, Donald's definition of success might not be as spiritually based as my own, but I'm always amazed by his passion and his dedication to his vision. And since those are central themes to the book, I thought he was a good choice to write the intro.

Q: ***Your commitment to hip-hop and rap music has put you in the spotlight as a spokesperson for issues surrounding racial epithets, as in the case between broadcaster Don Imus and the Rutgers women's basketball team. This incident has impacted more than just the entities directly involved. Is there a Do You! solution that could have prevented the negative experience for the Rutgers women's team and the domino effect seen on the country at-large?***

SIMMONS: I think the message in Do You! that is most appropriate to the Imus situation is always believing in the power of dialogue. Throughout my career, I've always tried to promote dialogue, no matter what was being debated and no matter who was doing the talking. In the book, I write, "In the absence of dialogue, people tend to stand in their separate corners and build walls based on their perceptions of differences. But once the conversation starts, then those walls fall down. And once those walls fall down, then we're free to build something meaningful and lasting."

So while I realize that situation was very hurtful to all those involved, I have to believe that it was ultimately a helpful dialogue for the country. Because at least it created a conversation about the pain black women in specific, and many women in general, feel when they hear words like "ho" on the airwaves. I'm sorry that the Rutgers team had to experience that initial negativity, but hopefully the dialogue it led to will help prevent similar words being used to describe another group of young women in the future.

Q: ***Where is your campaign in its progress to eliminate the N, B, and H words from use when depicting people in African-American/Black communities, music lyrics, and common everyday word usage?***

SIMMONS: We are working with record labels, rappers, and radio stations to create a space where people won't

have to hear those words on the airwaves. Certainly not everyone's happy with it, and we still have to be careful not to create an environment where rappers can be censored. But I do believe we are close to reaching a compromise that will keep those words off the airwaves.

Q: *With its association to gay-related hate crimes and intolerant behavior, why is the "F" word not included in your platform to eliminate derogatory terms? (For clarity, the "F" word refers to the terms fag and faggot.)*

SIMMONS: I understand that some people are disappointed we didn't include the "F" word in our initial recommendation, but I think it's important to remember that this was just the opening note in what I hope will be a very long conversation. If right off the bat we had proposed that radio bleep every offensive word in the English language, then I don't think the conversation would have lasted very long.

But I believe that if people see the value in bleeping words like "bitch" and "ho," then it will create a dialogue where soon they'll see the value in eliminating words like "fag" too. Because I think the more we can express the pain these kinds of words inflict, then the more we can convince artists not to use them and radio stations not to air them.

Q: *If the claim is made that artistic expression inclusive of derogatory and inflammatory language is protected by a person's 1st Amendment Rights, what reason is there for hip-hop or rap artists to eliminate the N, B, or H words from their lyrics? Wouldn't these terms be protected, too?*

SIMMONS: I'm not saying that rappers can't say "bitch" or "ho" in their music. They're artists, and it would be very dangerous for me or anyone else to try to control how they express themselves. But what I can suggest is that we not promote that sort of expression on the airwaves. If you want to hear "bitch" and "ho" when you're in the club, then that's your choice. But it should also be your choice not to have to hear those words on the radio.

Q: *You have stated that you are a "gay activist" that is not gay which is not uncommon for our allies. We welcome you with open arms. To this end, in what way are you being proactive and/or desire to support the gay community?*

SIMMONS: I consider myself an activist for all people who face struggle and oppression in the world. That's my job. And while we've made some strides, certainly gay people still face tremendous obstacles in this society.

My hope is that when a straight person like myself identify themselves as a "gay activist," it will give other people the confidence to take a similar stance. That's particularly true in hip-hop, where I realize still we have a long way to go on this issue.

Having said that, I believe ultimately hip-hop will play a major role in ending homophobia in America. Just like the hip-hop generation has helped this generation become much less racist than its parents, I think hip-hop will help kids today become less homophobic than the past generation as well.

Q: *With being a successful music and fashion business mogul it is very interesting to know that you take time for philanthropic endeavors. With what charitable efforts are you currently involved?*

SIMMONS: I'm very active with the Rush Philanthropic Foundation, which promotes arts to disadvantaged youths. Another group I'm very involved with is the Foundation for Ethnic Understanding. It's a group run by Marc Schneier that promotes dialogue between people from different backgrounds. That's another true passion of mine.

Q: *What advice can you give to the youth in our society, especially those who identify as African American/Black and gay?*

SIMMONS: I would say that while you might perceive your path as having more obstacles than the next person's, again, try not to focus on perception. Instead, try to clean off your lenses and see that despite the negativity you might feel, the world is still filled with so many wonderful opportunities for you.

Try to see all of that opportunity and then focus on giving the world beautiful things that have lasting value. Because when you do that, the world will always give you beautiful and value in return.

Q: *If handed complete control over the manifestation of your destiny, where would you see yourself in the year 2017?*

SIMMONS: It's hard to say, because I really try to focus on the present. As they say, the yesterday is gone and tomorrow might never come. That's why everything worthwhile in life happens in the present.

But if I were told that in 2017 my family was happy and I was using my resources to help people, then I would be good with that.

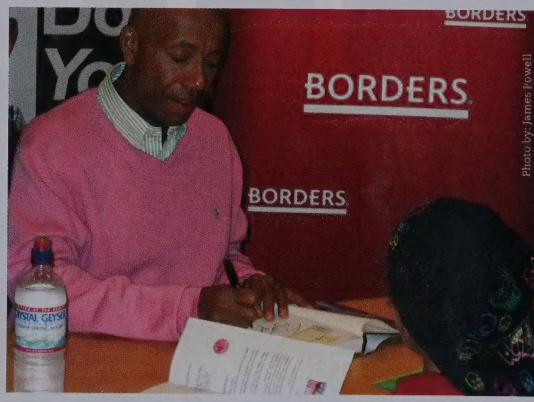


Photo by: James Powell

"...I believe ultimately hip-hop will play a major role in ending homophobia in America."

Q: *When all is said and done, how would you like to be remembered?*

SIMMONS: In the book, I write that I'd be happy if when I pass, my tombstone reads: "Here lies Russell Wendell Simmons, a person who started to understand that his only purpose in life was giving back to the world."

David P. Martin is the Managing Editor, Fred Brown, Jr. is the Advertising Director, and Robert E. Crawford is the Associate Publisher for PULSE Magazine.

WHITE HEAT

Text by **ZULEKHA HAYWOOD**

NOTHING LETS US KNOW THAT SUMMER IS OFFICIALLY IN SESSION LIKE A SEA OF WHITE. CRISP, REFRESHING, AND SEXY ON ANY SKIN TONE NO OTHER COLOR LEAVES AN IMPRESSION OF EFFORTLESS SOPHISTICATION LIKE A SLIP OF WHITE. WHETHER ELEGANTLY TAILORED OR LOOSE AND BOHEMIAN, WHITE SMOOTHLY TRANSFORMS ANY LOOK FROM STANDARD TO SUBLIME.

Stylist: **LLEWELLYN JENKINS**
Assistant Stylist: **CHAD L. GROOM** Grooming: **DOUGLAS SNUGGS**

TAKE SOME of the hood out of your hoodie without sacrificing street cred in this airy nylon version.

White Anorak by ***Andrew Nowell*** *$95 (andrewnowell.com). Skincare by* ***Iman*** *Time Control Skin Refresher Lotion and Oil-Free Moisture complex SPF 15*

Photographed by **Tarrice Love**

FLIP FLOPS are a summer wardrobe staple, but white ones instantly take this beach shoe from Southampton to St. Tropez. Wearing them with other neutrals gives them substance.

White flip flops by ***Abercrombie & Fitch*** *$20, Logo flip flops by* ***Marc Jacobs*** *$30*

A WHITE BELT with a bold statement buckle can be the missing ingredient for so-so trousers or jeans.

White belt with black stripes by ***J. Crew*** *$17, Silver buckle belt by* ***J. Lindeberg*** *$125*

USHER IN a Tighty-Whitey Renaissance with these Goth-inspired boxer briefs.

Bend The Rules *$70*
(bendtherules.com)

IT TAKES a man with a certain "joie de vivre" to don white frames.

(left to right) White cut-out frames by ***Valentino*** *$199, White aviators by* ***H&M*** *$10, Wraparound frames by* ***Moschino*** *$155, Silver aviators by* ***Modern Amusement*** *$175, Black/white 80s-inspired frames by* ***Cazal*** *$220*

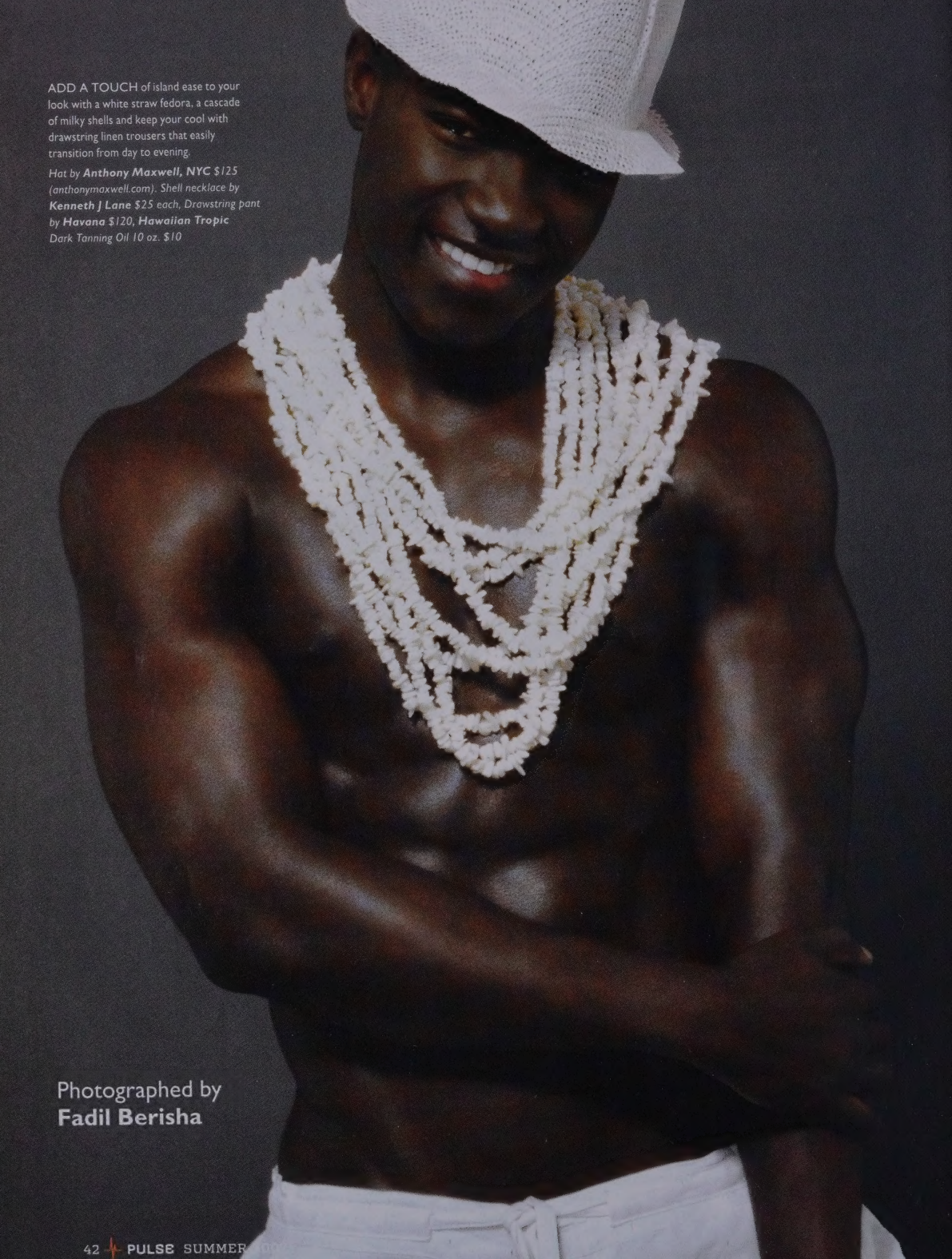
TAKE A BREAK from traditionally hued timepieces and let a pop of white leather slip from beneath that suit jacket. Choose one with a silver head to anchor the starkness of the band.

Big face timepiece by ***Kenneth Cole*** *Reaction $75, Sports watch by* ***H&M*** *$26, Triple-looped bracelet* ***Aldo*** *$23, Buckle bracelet by* ***Zara*** *$6*

Photographed by **Luiz Antonio**

WITH BEAUTIFUL packaging and complex texture, this fragrance doubles as stylish room accessories.

Jatamansi *Body Oil (8.4 fl. oz.) $95,* ***Comme des Garçons*** *"White" Eau de Toilette (1.75 fl. oz.) $66,* ***Costes*** *"White" Room Spray (3.4 fl. oz.) $79*



ADD A TOUCH of island ease to your look with a white straw fedora, a cascade of milky shells and keep your cool with drawstring linen trousers that easily transition from day to evening.

Hat by ***Anthony Maxwell, NYC*** *$125 (anthonymaxwell.com). Shell necklace by* ***Kenneth J Lane*** *$25 each, Drawstring pant by* ***Havana*** *$120,* ***Hawaiian Tropic*** *Dark Tanning Oil 10 oz. $10*

Photographed by
Fadil Berisha

The inspi(RED) décor for Rockefeller Plaza's "The Rainbow Room" captivated Inspirations book launch attendees.
Photo by JOHN LABBE

by Invitation Only

Conversation with Premier Celebrity Event Designer Preston Bailey

Interview by DAVID P. MARTIN

SPECIAL OCCASIONS are often celebrated with hosting a dinner or soirée to honor the moments of elation. For orchestrating high-profile spectaculars, internationally recognized event designer Preston Bailey, stands out at making memories last forever at the flick of a wrist. Think A-list stunners like Oprah's 50th birthday, Joan Rivers' daughter Melissa's wedding, and events for Bill and Camille Cosby as well as magnate Donald Trump! This past spring, after catching the exciting launch of Preston's new book, Inspirations, PULSE sat down with him for a chat.

(left) An enchanting décor in white and gold imbued Donald & Melania Trump's wedding at Mar-A-Lago in Palm Beach, FL.

Q: *You began your career as a model. Was that something you just fell into?*

PRESTON: Yeah, exactly...in the 70s. You know, when black was beautiful and if you were kind of attractive, you'd look into it. I modeled for a few years and managed to save some money. Then in the mid 70s, I opened up a clothing store along with two other people. It was on 62nd Street and 3rd Avenue in New York.

Q: *Then came floral design and event planning. I know of your book called Inspirations. Where did you get the idea for the title?*

PRESTON: Actually, from a friend.

Q: *So, is there something that or someone who inspires you in your work?*

PRESTON: My best friend, Vicente Wolf, who is an interior designer, suggested that I get into this business. I've known him for thirty years and he's always inspired me. Nature also inspires me... like Panama's beautiful rain forest. A lot of my work is about bringing in nature from outside. Two of my biggest sources of inspiration happened years ago. First, experiencing the Cherry Blossoms in Washington, D.C. was life changing for me. I like to invoke that same feeling in my work by bringing tons of flowers and creating that feeling of nature indoors.

Q: *Yes, how amazing? You capture it so well.*

PRESTON: Thank you. And it's the same feeling when I experienced fall for the first time. In Panama it's dry season or rainy season, we never experience fall. Coming here I experienced fall and it has always inspired me.

Q: *Did you always have an interest in floral designing and event planning?*

PRESTON: I had none. As a kid being gay and growing up in Panama, an interest in flowers as a career was not an option. It was fate. I needed a job. In 1980, my clothing store went out of business and I had nothing to do for a year. So, my friend Vicente Wolf suggested that I do weekly flower arrangements for two of his clients. That's how I started. As you can imagine, there were a lot of screw ups at the beginning. But I always said and I keep hearing that it's true, that if you screw up long enough you become an expert. *(both laugh)*

Q: *So, I want to go back to Panama for just a sec. What was your family structure like?*

PRESTON: I come from a very poor background. It was my parents, two brothers, two sisters, and me. I grew up around very strict Baptists. We had a great work ethic. Never been a lazy person. And I think coming from a Third World country, where work is so scarce, you learn to appreciate hard work. Whenever you got it, you kind of would run with it. *(laughs)* Part of my success can be attributed to the fact that I try to milk every opportunity that is presented t o me for what it's worth.

Q: *Oh cool. Were your family and friends supportive of you during this pursuit of floral designing?*

PRESTON: I've been in the business for 27 years now, but the first ten years were tough. And one of the reasons is that I had a serious alcohol and drug addiction at the time. Everything that I was earning was going up in smoke and poor management. So even though I worked very hard, I lost it all to partying.

Then I went sober in 1990. I only graduated from high school, so, I didn't have much education to fall back on. I knew I wasn't great at business; therefore, I just hired the right people to manage my affairs and all of that.

At one point, I owed over a million dollars in taxes due to poor management. I've learned to pay more attention, but at the time that didn't interest me at all. So, once I got an inner structure, things started changing. It took me years to

pay that money back and to really be in a place of solvency.

Q: *So you are not another overnight success?*

PRESTON: Not at all. Luckily, one of the things that I've always had is clients. Like anything else, you could say you're in business, but if you don't have any clients you don't have a business. Then, Joan Rivers gave me my big break when she picked me to do her daughter's wedding. Joan introduced me to Oprah and to many other people. Then once I appeared on Oprah, the celebrities started calling. Things sort of went from there.

Q: *What was your most memorable project?*

PRESTON: Oprah's 50th birthday party was quite extraordinary for me, Donald Trump's wedding recently, Mr. Bill Cosby's daughter's wedding. He and Mrs. Cosby were absolutely amazing to work with. Dr. Johnson, the former owner of BET.

Q: *Would any of those have been the most lavish or extravagant?*

PRESTON: You know, they all are... and I say that cautiously.

Q: *When you plan a party for yourself, would it be any different than it would be for a client?*

PRESTON: I like to entertain in a very inviting, no hassle, and welcoming kind of way. I love mixing different kinds of people. I love the idea of throwing everybody together. And let them mix it up and work it up for themselves. That tension, I think, creates an exciting party.

Q: *Recently, I was online looking for a flower delivery service and came across the Preston Bailey Signature collection at 1-800-Flowers.com. Tell me more.*

PRESTON: One of the great things about the success of my company is that we have been asked by others to partner with them to create situations for their businesses. There are two partnerships that I'm most proud. One is 1-800-Flowers with whom we have created signature collections that they use for deliveries. The second is with Sandals Resorts who approached me a couple of years ago to design four reasonably-priced, yet, beautiful packages that average people who are getting married can afford. I am very proud of these partnerships.

Q: *Could this be the beginning of a product line?*

PRESTON: I have table settings and bedding in the pipeline. We're also in discussion with different stores like Bed, Bath & Beyond.

Q: *Okay, how does Preston Bailey unwind and relax?*

PRESTON: Working out... *(he laughs)* I do... I train for the triathlon. My partner and I also travel together a lot. He is a singer and travels a lot and I meet him whenever we have a moment. We try to get away. Hanging out with friends, is another way of relaxing and giving parties.

Q: *Can you estimate how many different types of flowers or blooms exist for you to work with?*

PRESTON: First of all, there are hundreds of thousands of them.

Q: *Are they all easily accessible?*

PRESTON: Some of them easier than others. There have always been certain flowers that I loved. I'm a romantic, so I like soft beautiful roses and hydrangeas. I love the variety of orchids. I'm a little bit of a snob about flowers by the way.

I like flowers that have a great quality and I like quantity. Don't send a dozen roses; send eight dozen, if you can. If you really love someone, really show them in quantity. Please! ...people respond to that.

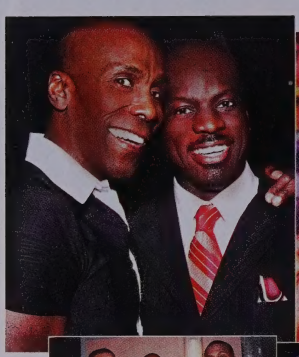
Q: *That's true. Is there a particular fragrance, floral, or color that you are fond of?*

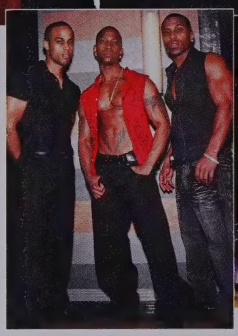
PRESTON: I love the fragrance of gardenias. I prefer colors more than white. I love lavender, hot pinks, and magentas, and all of the dried colors. Whenever you walk into a room and there's color and vibrancy, you can create a festive mood just with that alone. So the emotion that is conveyed through these colors I find fascinating.

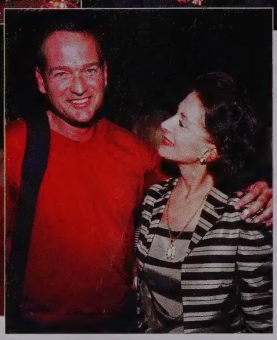
Q: *If you could go anywhere in the world, what would be your destination of choice?*

PRESTON: I have been to most of the places that I have wanted to visit. *(laughs)* I have been to South Africa, which I really love a lot! I do want to go to Australia, but I need to set aside like two or three weeks to go there.

(top) Preston Bailey among sea of Inspirations. (left) An exquisite multicolored floral wedding scheme was created at the Four Seasons Hotel in New York, NY.







Guests at "Inspirations" book launch party. (top, L to R) Preston & GMAD's Executive Director Tokes Osubu, singer and actress Jennifer Holliday, actress and former model Toukie Smith & make-up artist Joey Mills, and Preston & PULSE Editor-in-Chief Byron Barnes. (bottom, L to R) City Gym Boys: Rome, founder Charles LaSalle & Yusuf, revelers Betsy Lovette & Robin Albaneze, and photographer John Labbe & his mother Denise Labbe. Photos by Jim Carroll.

Q: ***From what I understand you don't have much time? It was so hard to get in touch with you.***

PRESTON: Yeah man, it's very difficult. The good news is, of course, that I'm traveling a lot to these wonderful places for business, and while I'm there, take a day or two here and there for myself.

Q: ***As far as music, is there any particular music you prefer?***

PRESTON: I'm a huge fan... such a music lover, it's not even funny. My range goes from R&B to Latin to... I like it all... and because my boyfriend is a jazz singer... it's jazz for the moment.

Q: ***Can you tell us more about your boyfriend?***

PRESTON: His name is Theo Blackmann. We met at the gym. He has opened up my eyes to the world of jazz. He has great integrity as an artist and creates quality work.

Q: ***How do you balance your relationship and work?***

PRESTON: It's very hard considering he's got shows. He travels more than I do, so we try to plan ahead around our respective schedules to make time that is just for us. We may go away for a few days or something. It's like an eternal honeymoon kind of a thing. But other times it can get kind of lonely, but we work that out.

Q: ***Wonderful, that is beautiful. Throughout history significant contributions, especially in the arts, have been made by men of color who identify as gay or bisexual. For the PULSE reader, could you share encouraging words to those who may be pursuing dreams or endeavors as you have?***

PRESTON: Don't let the color of your skin hold you back. I have always thought of it as an asset by the way. ... Never a liability. You have to gain the confidence and that security within yourself that stabilizes you. What I do find interesting is the reverse discrimination that also exists. If you're a person of color and you have anything to say or contribute, immediately it's heard differently and heard louder. It's almost like "oh, he's really good, he's one of the good ones" kind of thing. So in my experience, it's always worked for me.

Q: ***The African American community has been hardest hit by HIV/AIDS. Is there something missing from our conversations in our neighborhoods or a responsibility not being addressed among African Americans?***

PRESTON: I think the actual educational value of it... to be told clearly what it is about. I think it is really important.... and that we are clear about it. You know, growing in the 80s and being part of a time when many people died, was the best education. Everyone has a responsibility to educate themselves as much as possible.

Q: ***What are your thoughts, if any, pertaining to Senator Barack Obama's presidential bid? Is America ready for an African American president?***

PRESTON: Oh, my god, I think it is great. This is the time. Let me put it this way... America is more ready now than ever. And that's a good thing.

Q: ***What would you like your legacy to be? How do you want to be remembered when all is said and done?***

PRESTON: *(sighs)* Hmmm. As someone of integrity; someone who knew how to feel through life as best as possible; creator of images that inspired people to live better in whatever way possible.

Q: ***If there were one word, phrase, or quote that characterized Preston Bailey, what would that be?***

PRESTON: Lots of balls!

Q: ***That's it. I appreciate your taking time out of your schedule. It's been a pleasure to talk with you.***

PRESTON: Same here. Good luck to you.

David P. Martin is the Managing Editor for PULSE Magazine.

REFLECTIONS ON
JAMES BALDWIN
(1924-1987)

Those Big Eyes! That was all that I recognized as "distinct" upon first encountering the writer James Baldwin. A fellow English major suggested I check him out after I kept complaining of my *lack of connect* with Harlem Renaissance literature; i.e., I didn't get how celebrated poet Langston Hughes was "speaking for the people." I didn't see his New York. As a fledgling writer cum artist, I thought the Harlem Renaissance was to inspire instead of confound. I found that most works spoke more to black *flight* and *fright*, than to the *fight* I imagined. Was it ignorance?

It was this same black middle class, light-skinned indifference that allowed me to initially be equally dismissive of the frail, bug-eyed Baldwin. I tried to maintain this posture, although after Another Country, One Day When I Was Lost, and Giovanni's Room, I was immediately affected by his sensitivity to words. Sure, every writer fancies himself a wordsmith able to negotiate, manipulate, and exact his or her proficiency/mastery of language to engage the reader; however, Baldwin's was almost mystic and aloof playful wizardry. The scenes he cast were vivid, rich, clear depictions of life as only *those big eyes* could possibly capture. Steeped deep in the church, the civil rights movement, as well as his reality as an openly gay black genius in an unforgiving United States, he was as unforgiving in flexing every possible literary tool at his disposal to pointedly breathe life into stories of people of color and/or controversy the world over at the hands of the oppressive rich, white, male bureaucracy/ideology.

Smart to the point of being smug, Baldwin's work informed my appreciation for finesse. He understood words and images, but, greater still, rhythm. Music found harmony and grace in the fabric of his work, as is artfully demonstrated the malleability of language is his mind's eye. Just as "hip-hop" was born out of the poetry of the ghetto put to the equally *altered* rhythm and melodies of real life, so did Baldwin place his words, his scenarios, his tales to the time and meter of Jazz, Bebop, Gospel, Blues, et al... *the cry of the day.*

The mastery of language and the art of phrasing are the two greatest of Baldwin's influences of which I find important in literature. Just Above My Head is Baldwin at the height of his literary power. This rhythmic playfulness exacting a beautiful tale of brotherly love, life, and loss in New York City *and then some*, is, in my opinion, one of his greatest, most complete literary works ever written. Ever since my first reading this book in the summer of '89, I have re-read it annually just to remind me of why I love literature, music, art, men, life and, even more, brother Baldwin. This one book had me look at every male relationship that had ever affected me in a completely different way.

Exploration, analysis, and appreciation of Baldwin's work and life inspire me to keep my own work and life informed and purposeful, in addition to being smart, honest, concise... real. It is in this spirit that PULSE editors sought out personal reflections from some current literary young guns on just how that of James Baldwin has affected their lives and/or work.

— BY JOEL BLACK

It was **ANOTHER COUNTRY**. "*This* is the great American novel," I thought after I crossed it off my extracurricular reading list in college. Certainly I had read and appreciated **GIOVANNI'S ROOM** earlier. Yet, in that literary landmark by a black gay writer, I could see no reflections of myself among the white characters...at least not in ways that mattered to me at the time as I started to explore my own identity as a high school youth. In **ANOTHER COUNTRY**; however, James Baldwin grappled directly with issues of race, gender, and sexuality in an international context with a passion and intensity that left an impression. And it is at that intersection, the complexities of identities, where I met Baldwin. For he gave me the gift of understanding not only that I was black, male, homosexual, and American, but also that *I* could define those identities—and critique them—as I chose to. As I learned more about his life...his involvement in the civil rights movement, his critique of America, his choice to be an expatriate...it illuminated a path of broader possibilities for me. That he had shared the stage with Malcolm X in a debate on race relations in America in 1961, five years after being criticized by many blacks for writing **GIOVANNI'S ROOM**, also showed me that there was a path toward pride before Stonewall. He showed me that I could accept who I was, but not let it limit who I was to become; that there was a world beyond blackness, gayness, or being American that I had a right to explore. Indeed, as I travel the globe myself these days, it is that expansiveness that guides me.

— **Bryan E. Glover**

JAMES BALDWIN CHALLENGED ME—TO MY FACE.

In 1984, I was in a college production of his play **THE AMEN CORNER** *at Yale. I hadn't read any of his work, except for the play: the story of a charismatic female pastor, whose son wants to move out of church piano playing and into the world of professional Jazz music—the world of his estranged father. I played the son, David, a surrogate for Baldwin—a complicated and wonderful part. The writing captured the allure of the church and the pull of the world of music with equal vitality. The family dynamics were visceral. It isn't a coming out play, but a few years later my own—coming out and struggle with my mother—would mirror the piece. At some point, I heard the cast would get to meet Baldwin when he came to the university. He'd see the play and talk with us afterwards.*

He never saw it. His trip was cut short and he had less than an hour with us. Baldwin was short, as I recall, and dark with piercing eyes. He said a few words to us as a group and then, the cast lined up and, one by one, Baldwin gave his blessing. I approached him, my photocopied script in hand. I told him I wanted to be an actor: **Do you really want it?** *he asked.* **Yes I do.** *I responded. Then, he said,* **Go the distance.** *Then he pulled out a pen and wrote that on page one of my script. He nodded at me, sending me on my way—an artistic and spiritual benediction from a creative ancestor.*

I have, since, read much of his work and he inspires me to tell my story—boldly, theatrically—whenever I can.

— **Steve Harper**

A POET'S WRITER

and essayist, James Baldwin was as passionate a writer as he was precise seizing language in order to be not only a change-maker in the world, but to offer a uniquely poignant voice to the American literary and cultural landscape. As among the first Black writers to be accepted in the literary canon as a "great," he paved a path for those of us weighing the balance between canonical acceptance and being a voice for our people—black, gay, and other—searching for something that honestly reflects back our beautiful ugly and our ugly beautiful.

From Baldwin, I've learned how to be a more honest writer, to be precise and careful with my words, to respect the power of language enough to avoid clichés, to trust the universality of the personal enough to share it bravely, and to understand that activism is not so much something we do, but something that emanates from our truth. The world needed to be shaken and Baldwin was among many whom did that well. I too hope to shake it into something he would be more proud of—understanding that I'm a griot who holds his legacy and impact close to my heart.

— **Tim'm T. West**

Life Ajar, Exposed *for James A. Baldwin*

Between seasons of sleet and hydrangeas, You were to be found just in time. There as woolen or cashmere, stacking contradiction and clarity in the same buggy. Your cayenne language, its grasp, congratulates articulate congas: mood, craft, message. James Arthur Baldwin, you gave the people nuance, ample alert, turpentine through a pop-eyed gaze. As for causes of this bleeding high noon of late: Urgency escapes us. The Oval Office is out of lies. And there's the groggy hiss of half-dozen and six: Same-sex union or gay marriage, more of life ajar, exposed. Sometimes styling syllables into meaning trips me, gaunts my stride like the rise of brothers barebacking.

— **Rodney Terich Leonard**

I Love James Baldwin

James Baldwin spoke his truth. As a reader, I am still discovering his truths and what they could mean for me as a storyteller, intellectual, human being. As a writer, I am both exhilarated and intoxicated by his insights, and challenged and motivated to do my best work. Baldwin described for me, in a very loving way that my experiences as a man who loved men, were important, critical, and valid—and that my experiences needed to be treated with care. He revealed to me that I was a caretaker and put me on notice: ***I was a storyteller and needed to be clear about the joy and pain this work brings.***

He illuminated the beauty and terror of being black in America, but never underestimated or belittled us. He shared that the price of the ticket had already been paid for, and that all I needed to do was be.

He was erudite and quite hilarious.

He left home, but he never really left home. He was brave and arrogant and sure in his abilities as a writer and as an intellectual. He has remarked that he thought he was ugly, but he was quite beautiful to me. Indeed, I was in love with him and most everything he did.

I wanted to be a writer. I imagine him smiling that toothy grin of his and telling me, "Go for it."

He mattered to me because he was a sissy and didn't hide. I loved the way he held his cigarette. I enjoyed the way he handled the public. He questioned the status quo. Baldwin's gift for understatement was the balm this little yellow Negro needed while growing up in Toledo, Ohio, feeling lost, abandoned, and ignored.

— BY STEVEN G. FULLWOOD

JAMES BALDWIN *wrote of 1940s Harlem in* **THE FIRE NEXT TIME,** *but in his keen observation and unvarnished honesty—for me as an 18-year-old first time reader of Baldwin—he seemed to perfectly describe the wretches of 1993 Chicago. His insights were my insights, only delivered with eloquence and compassion, and once openly expressed instantly affirmed my life and experience. Suddenly, I wasn't crazy or alone, but instead a figure with a place in something humbling in its profundity. Baldwin also made me see I was a part of a community gifted with unyielding faith (if sometimes fanatical and misguided) and courage. Devilishly, he whispered to me that I knew a thing or two about my community and had the right to say something about what I saw. That he could give me the keys to my own community and encourage the rise of my voice, made me fall in love with him. That he could also speak the desires of my heart in* **JUST ABOVE MY HEAD** *made me an acolyte forever. Baldwin's last novel exquisitely described the delicious, familiar sweetness of first time love between two black men, leaving me naked and wondering how his hands could reach across the decades to know and touch me so intimately. Through the impossibly high bar he set, lessons in the necessity of artistic vulnerability and demonstrations of how to speak on one's life, I write praying to one day restore the value, erase the loneliness, and encourage the survival of another black boy I'll never meet. It's the only reciprocation I can conceive worthy of the gift my Big Brother Baldwin bestowed to me.*

— BY L. MICHAEL GIPSON

THE STRONG CLEAR VOICE OF JAMES BALDWIN

I was 21 and starting out in journalism when an editor of mine gave me a copy of Baldwin's Giovanni's Room. I was suspicious. Was he saying that I, a Latino, should stick to writers of color? Or was he implying that my tastes were parochial?" At that time, Hemingway was my favorite writer: good, strong, clear prose. No fat, and a power that struck you unmistakably, with force, quietly and cumulatively. His work was undeniably brilliant, and unquestionably masculine. That night, I cracked Giovanni's Room open—grudgingly—and was almost immediately assaulted with this paragraph: *"If this were not so I would not be alone in this house tonight. Hella would not be on the high seas. And Giovanni would not be about to perish, sometime between this night and this morning, on the guillotine."* I couldn't bring myself to read any further. This wasn't Hemingway. It was Douglas Sirk. In short, at that age, James Baldwin embarrassed me. His breathless prose, his tortured (gay) lovers, his, well, *effeminacy.* Boy did I miss the boat! Years later I read Giovanni's Room again and it was a profoundly different experience. I found it compulsively readable. What once struck me as florid and overdone now seemed so much simpler, almost like a fine line drawing. I couldn't put it down. I appreciate his craftsmanship now, and also his honesty and integrity. For me as a writer, James Baldwin is more than just a trailblazer. He is a North Star to sail by—someone who, over fifty years after he first burst onto the literary scene, can still guide us, if only we let him. All you have to do is not be a punk, and give him a chance.

— BY GARY TERRACINO

SILENT OUTBREAK

SYPHILIS, ANOTHER "MONSTER" AMONGST US

BY J.P. SÁNCHEZ, M.D.

MY FRIENDS CONSTANTLY comment, "Oh you're such a germaphobe, loosen up, and just have sex!" Yes, I admit that I'm the first among my friends to raise the issue of STDs during general discussion of our sexual exploits. As a doctor, I've been inspired to do this work by a family member who died from AIDS and a desire to live as an HIV-negative gay man. Whether through my family upbringing or community, professional, and personal experiences, I've come to believe that my own health and serostatus is tied directly to the health of the community where I find my partners. And as we know, Latino and Black men who have sex with men have higher rates of sexually-transmitted diseases (STDs) than other groups. The latest emerging STD epidemic is syphilis, a disease of great historical significance to our community and an important factor associated with increasing rates of new HIV infection among Latino and Black men.

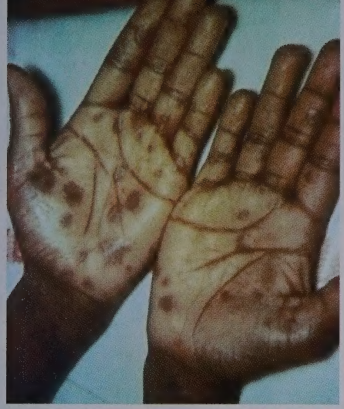
A couple of weeks ago on an outing with my boys, I raised the topic of syphilis. My company consisted of a self-proclaimed politicizing body whore, an eclectic hopeless romantic, a sarcastic effeminate pessimist, and a new cute addition to the group. What I learned from my companions was that they believed syphilis was more of an illness of "country or super-promiscuous folk" and, therefore, not a problem among our network. The reality is that nationally, those infected with syphilis are three times more likely to be black than white. Since the late 1990s, major U.S. cities have experienced outbreaks of syphilis primarily among men who have sex with men. Worse is the fact that the co-infection rate of syphilis and HIV is reported to be as high as 40%.

I must admit that initially, like my friends, I was surprised that syphilis was once again an issue in our community especially given the legacy of the infamous Tuskegee Study, which looked at the progression of syphilis among a cohort of poor black men starting in 1932. The study was stopped 40 years later after it was revealed that available treatment was intentionally withheld from its 600 participants. This atrocity, which led to a presidential apology from President Clinton, is why some in our community have such a strong distrust for the public health/medical establishment. After numerous sighs and the comical, "Whatever child, let's drink!" how could I fault their sentiments? In the wake of exhaustive HIV prevention efforts, an overwhelmed public has unwittingly allowed syphilis to re-emerge as a menace to our community.

What makes syphilis more challenging to address is that the symptoms can be easily missed or ignored. Unlike the annoying drip or burning of gonorrhea or painful herpes vesicles *(blisters)*, the initial sign of syphilis is a *painless* skin ulcer. This ulcer *(chancre sore)* can appear on the penis, or in more obscure places like under the scrotum, between the butt, in the rectum, or even in the mouth. The ulcer will disappear on its own, which often allows some to mistakenly believe its appearance was due to an ingrown hair or chaffing. What makes the ulcer so troubling is that it permits the transmission of HIV to occur more easily.

If not treated, the infection will manifest as a reddish-brown rash appearing on the palms of the hands, soles of the feet, and extend over the entire body. As with the initial ulcer *(primary syphilis)*, the rash *(secondary syphilis)* also disappears on its own. If secondary syphilis is left untreated (or the person's immune system is not well or immune compromised as with people with HIV), the infected person runs the risk of developing permanent brain, eye, heart, and bone damage or death due to syphilitic infection of the brain *(tertiary syphilis)*.

Despite the gloomy prospects, there is good news! Syphilis is preventable and curable. Prevention starts by using latex or polyurethane condoms with water-soluble lubricants for ALL types of sex (oral, rectal, or vaginal) with ALL partners. In order to diagnose syphilis, a physical exam and blood test are necessary. During the primary stage of infection, treatment is one shot of penicillin (in the butt!). If in the secondary stage, treatment consists of three shots of penicillin (once per week for 3 weeks in a row). And, within the third stage (diagnosed by a spinal tap or "lumbar puncture"), treatment is by intravenous penicillin for at least 14 days. If someone is allergic to penicillin, they can be "sensitized" to the medication in the hospital or sometimes given another antibiotic. All persons with syphilis should also be tested for HIV, because having both HIV and syphilis may affect the treatment. Weeks to months after treatment,



the blood level of syphilis antibodies should decrease dramatically indicating the syphilis has been cured. If not, the person may have been re-infected or the treatment provided ineffective. A follow-up visit with your health care provider is essential after being treated for syphilis.

Discussions about syphilis with friends during your leisure may be awkward or frowned upon, but the information shared may prove to be invaluable. A couple of nights after hanging out with my boys, I got a phone call at 2am from one of them. I could tell from his voice, even in my drowsy state, he wasn't about to share a "sex-capade." It was something serious. He had received a call from a person he'd been intimate with, who disclosed having syphilis and told him to get tested. My friend was agitated, not because of the possible syphilis exposure, but by the fact that he may have also been exposed to HIV. I deal with STD infections everyday as a doctor, but I'm still blown away when it happens to a friend. Talking about STDs may be burdensome or unpopular, but communication about such topics is the first step to controlling this latest epidemic.

If you have any further questions or would like an educational video about syphilis feel free to contact: John Paul Sánchez, M.D., M.P.H. at josanche@montefiore.org. Additional information can also be attained through your health care provider, local health department, or the Centers for Disease Control and Prevention (www.cdc.gov).

Collaborating on this article with Dr. Sánchez were Kwame Gyasi, M.B.A., MSII and John Nelson, NP, Ph.D.

SELF-ASSESSMENT QUIZ ON SYPHILIS AWARENESS

The following questions were utilized to evaluate the effectiveness of an educational intervention to promote syphilis knowledge and testing. Complete the following questions and assess your own understanding of syphilis:

1. Which statement about syphilis and HIV is true:
- ○ A) syphilis sores make it easier to get HIV infection
- ○ B) syphilis infection can cause AIDS
- ○ C) syphilis sores do not increase your risk for HIV infection
- ○ D) syphilis and HIV are the only sexually transmitted diseases that are important
- ○ E) none of the above

2. You are at increased risk for syphilis infection by:
- ○ A) taking medications after sex
- ○ B) not urinating or "peeing" after sex
- ○ C) not washing up after sex
- ○ D) having unprotected sex with multiple partners
- ○ E) all of the above

3. Syphilis can be transmitted by:
- ○ A) sharing towels
- ○ B) oral sex
- ○ C) drinking from the same cup
- ○ D) shaking hands
- ○ E) all of the above

4. A common symptom of syphilis infection is:
- ○ A) coughing
- ○ B) penile or vaginal discharge
- ○ C) sore that does not hurt
- ○ D) diarrhea
- ○ E) all of the above

5. You can reduce your risk for syphilis infection by:
- ○ A) urinating or "peeing" after sex
- ○ B) reducing your number of partners
- ○ C) washing up after sex
- ○ D) taking medications before sex
- ○ E) all of the above

6. Which statement about syphilis treatment is true:
- ○ A) syphilis is curable
- ○ B) once treated you can not be re-infected with syphilis
- ○ C) once the sore or rash disappears the person no longer requires treatment
- ○ D) sexual partners of those infected with syphilis do not need to be tested
- ○ E) none of the above

7. Syphilis transmission can be prevented by:
- ○ A) washing your hands after shaking someone's hands
- ○ B) only using your own towel
- ○ C) drinking from your own cup
- ○ D) wearing condoms during sex
- ○ E) all of the above

8. Which statement about syphilis and HIV infection is true:
- ○ A) you can not be infected with syphilis and HIV through sex
- ○ B) treating syphilis sores can help to reduce your risk for HIV infection
- ○ C) only gay men are at risk for HIV and syphilis infection
- ○ D) both syphilis and HIV infection can be cured
- ○ E) none of the above

9. Which statement about syphilis treatment is true:
- ○ A) syphilis is not curable
- ○ B) once a person is treated their partner does not have to be tested for infection
- ○ C) syphilis persists without treatment
- ○ D) even with treatment sores do not go away
- ○ E) none of the above

10. Treating syphilis infection can prevent:
- ○ A) infertility
- ○ B) organ damage
- ○ C) cancer
- ○ D) stroke
- ○ E) all of the above

Use the key below to tally your answers and determine your awareness level.

1. a, 2. d, 3. b, 4. c, 5. b, 6. a, 7. d, 8. b, 9. c, 10. b.

1-5 correct **(BELOW AVERAGE)** 6-8 correct **(AVERAGE)** 9-10 correct **(STRONG)**

Indication

LEXIVA is indicated in combination with other antiretroviral agents for the treatment of HIV infection in adults.

- The PI-experienced patient study was not large enough to reach a definitive conclusion that LEXIVA/ritonavir and lopinavir/ritonavir are clinically equivalent.
- Once-daily administration of LEXIVA/ritonavir is not recommended for PI-experienced patients.

LEXIVA does not cure HIV or prevent passing HIV to others.

Important Safety Information

- You should not take LEXIVA if you have had an allergic reaction to LEXIVA or AGENERASE® (amprenavir).
- High blood sugar, diabetes or worsening of diabetes, and bleeding in hemophiliacs have occurred in some patients taking protease inhibitors.
- When you start taking HIV medicines, your immune system may get stronger and could begin to fight infections that have been hidden in your body, such as pneumonia, herpes virus, or tuberculosis. If you have new symptoms after starting your HIV medicines, be sure to tell your doctor.
- Changes in body fat may occur in some patients taking antiretroviral therapy. The cause and long-term health effects of these conditions are not known at this time.
- Skin rashes can occur in patients taking LEXIVA. Rarely, rashes were severe or life threatening.
- Opportunistic infections can develop when you have HIV and your immune system is weak. It is very important that you see your healthcare provider regularly while you are taking LEXIVA to discuss any side effects or concerns.
- Most common side effects in clinical studies were diarrhea, headache, nausea, rash, and vomiting. In most cases, these side effects did not cause people to stop taking their medicine.

Drug Interactions

- LEXIVA should not be taken with: AGENERASE® (amprenavir), Halcion® (triazolam), ergot medications (Cafergot®, Migranal®, D.H.E. 45®, and others), Propulsid® (cisapride), Versed® (midazolam), Orap® (pimozide), Zocor® (simvastatin), Mevacor® (lovastatin), Rifadin® (rifampin), Rescriptor® (delavirdine mesylate), or St. John's wort (Hypericum perforatum). If you are taking Norvir® (ritonavir), you should not take Tambocor® (flecainide), or Rythmol® (propafenone hydrochloride).
- Serious and/or life-threatening events could occur between LEXIVA and other medications, including Cordarone® (amiodarone), lidocaine (intravenous only), Elavil® (amitriptyline HCl) and Tofranil® (imipramine pamoate), tricyclic antidepressants, and Quinaglute® (quinidine).
- Women who use birth control pills should choose a different kind of birth control. The use of LEXIVA with Norvir (ritonavir) in combination with birth control pills may hurt your liver. Also, birth

control pills may not work if you take LEXIVA or LEXIVA with Norvir. Talk to your healthcare provider about choosing the right birth control for you.

- Patients taking Viagra® (sildenafil citrate) or LEVITRA® (vardenafil HCl) with LEXIVA may be at an increased risk of side effects.
- This list of drug interactions is not complete. Be sure to tell your healthcare provider about all medicines you are taking or plan to take, including over-the-counter drugs, vitamins, and herbals.

Resistance

- Missing or skipping doses of your medicine may make it easier for the virus to mutate and multiply. Your medicines may not work as well against a mutated virus and you may become cross-resistant to other HIV medicines. It's important to take your medicine exactly as prescribed.

Please see important information on adjacent page.

If you don't have prescription coverage and can't afford your medicines, visit pparx.org, or call 1-888-4PPA-NOW (1-888-477-2669)

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They rely on me, I rely on a regimen with LEXIVA

If it's time to start HIV treatment, ask your doctor if LEXIVA plus ritonavir may be right for you.

With LEXIVA plus ritonavir you can:

- Take once a day*
- Eat and drink when you want
- Take antacids and other heartburn medications†
- Have a lower chance of diarrhea‡

*Once-daily dosing is not recommended for patients who have taken protease inhibitors in the past.

†LEXIVA without ritonavir may be less effective due to decreased blood levels of amprenavir when taking H_2 antagonists with LEXIVA. No dose adjustments required with PPIs when taken at the same time as LEXIVA.

‡10% rate of moderate-to-severe drug-related diarrhea in therapy-naive patients compared to 18% for nelfinavir.

LEXIVA does not cure HIV or prevent passing HIV to others.

Individual results may vary.

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PATIENT INFORMATION

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(lex-EE-vah)
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Read the Patient Information that comes with LEXIVA before you start taking it and each time you get a refill. There may be new information. This information does not take the place of talking with your healthcare provider about your medical condition or treatment. It is important to remain under a healthcare provider's care while taking LEXIVA. **Do not change or stop treatment without first talking with your healthcare provider.** Talk to your healthcare provider or pharmacist if you have any questions about LEXIVA.

What is the most important information I should know about LEXIVA?
LEXIVA can cause dangerous and life-threatening interactions if taken with certain other medicines. Tell your healthcare provider about all the medicines you take, including prescription and nonprescription medicines, vitamins, and herbal supplements.

- Some medicines cannot be taken at all with LEXIVA.
- Some medicines will require dose changes if taken with LEXIVA.
- Some medicines will require close monitoring if you take them with LEXIVA.

Know all the medicines you take, including prescription and nonprescription medicines, vitamins and herbal supplements. Keep a list of the medicines you take. Show this list to all your healthcare providers and pharmacists anytime you get a new medicine or refill. Your healthcare providers and pharmacists must know all the medicines you take. They will tell you if you can take other medicines with LEXIVA. **Do not start any new medicines while you are taking LEXIVA without talking with your healthcare provider or pharmacist.** You can ask your healthcare provider or pharmacist for a list of medicines that can interact with LEXIVA.

What is LEXIVA?

LEXIVA is a medicine you take by mouth to treat HIV infection. HIV is the virus that causes AIDS (acquired immune deficiency syndrome.) LEXIVA belongs to a class of anti-HIV medicines called protease inhibitors. LEXIVA is always used with other anti-HIV medicines. When used in combination therapy, LEXIVA may help lower the amount of HIV found in your blood, raise CD4+ (T) cell counts, and keep your immune system as healthy as possible, so it can help fight infection. However, LEXIVA does not work in all patients with HIV.

LEXIVA does not:

- cure HIV infection or AIDS. We do not know if LEXIVA will help you live longer or have fewer of the medical problems (opportunistic infections) that people get with HIV or AIDS. Opportunistic infections are infections that develop because the immune system is weak. Some of these conditions are pneumonia, herpes virus infections, and *Mycobacterium avium* complex (MAC) infections. **It is very important that you see your healthcare provider regularly while you are taking LEXIVA.** The long-term effects of LEXIVA are not known.
- lower the risk of passing HIV to other people through sexual contact, sharing needles, or being exposed to your blood. For your health and the health of others, it is important to always practice safer sex by using a latex or polyurethane condom to lower the chance of sexual contact with semen, vaginal secretions, or blood. Never use or share dirty needles.

LEXIVA has not been fully studied in children under the age of 18 or in adults over the age of 65.

Who should not take LEXIVA?

Do not take LEXIVA Tablets if you:

- are taking certain other medicines. Read the section **"What is the most important information I should know about LEXIVA?"** Do **not** take the following medicines* with LEXIVA. You could develop serious or life-threatening problems.
  - HALCION® (triazolam; used for insomnia)
  - Ergot medicines: dihydroergotamine, ergonovine, ergotamine, and methylergonovine such as CAFERGOT®, MIGRANAL®, D.H.E. 45®, ergotrate maleate, METHERGINE®, and others (used for migraine headaches)
  - PROPULSID® (cisapride), used for certain stomach problems
  - VERSED® (midazolam), used for sedation
  - ORAP® (pimozide), used for Tourette's disorder

Do **not** take the following medicines if you are taking LEXIVA and NORVIR® (ritonavir) together. You could develop serious or life-threatening problems.

  - TAMBOCOR® (flecainide), used for certain abnormal heart rhythms
  - RYTHMOL® (propafenone), used for certain abnormal heart rhythms

- **are allergic to LEXIVA or any of its ingredients.** The active ingredient is fosamprenavir calcium. See the end of this leaflet for a list of all the ingredients in LEXIVA.
- **are allergic to AGENERASE® (amprenavir).**

You should not take AGENERASE (amprenavir) and LEXIVA at the same time.

Before taking LEXIVA, tell your healthcare provider about all your medical conditions including if you:

- **are pregnant or planning to become pregnant. It is not known if LEXIVA can harm your unborn baby. You and your healthcare provider will need to decide if LEXIVA is right for you. If you use LEXIVA while you are pregnant, talk to your healthcare provider about how you can be on the Antiretroviral Pregnancy Registry.**
- **are breastfeeding.** You should not breastfeed if you are HIV-positive because of the chance of passing the HIV virus to your baby through your milk. Also, it is not known if LEXIVA can pass into your breast milk and if it can harm your baby. If you are a woman who has or will have a baby, talk with your healthcare provider about the best way to feed your baby.
- **have liver problems.** You may be given a lower dose of LEXIVA or LEXIVA may not be right for you.
- **have kidney problems**
- **have diabetes.** You may need dose changes in your insulin or other diabetes medicines.
- **have hemophilia**
- **are allergic to sulfa medicines**

Before taking LEXIVA, tell your healthcare provider about all the medicines you take, including prescription and nonprescription medicines, vitamins, and herbal supplements. LEXIVA can cause dangerous and life-threatening interactions if taken with certain other medicines. You may need dose changes in some of your medicines or closer monitoring with some medicines if you also take LEXIVA (see **"What is the most important information I should know about LEXIVA."**). **Know all the medicines that you take and keep a list of them with you to show healthcare providers and pharmacists.**

Women who use birth control pills should choose a different kind of contraception. The use of LEXIVA with NORVIR (ritonavir) in combination with birth control pills may be harmful to your liver. The use of LEXIVA with or without NORVIR may decrease the effectiveness of birth control pills. Talk to your healthcare provider about choosing an effective contraceptive.

How should I take LEXIVA?

- Take LEXIVA Tablets exactly as your healthcare provider prescribed.
- **Do not take more or less than your prescribed dose of LEXIVA Tablets at any one time.** Do not change your dose or stop taking LEXIVA without talking with your healthcare provider.
- You can take LEXIVA Tablets with or without food.
- When your supply of LEXIVA or other anti-HIV medicine starts to run low, get more from your healthcare provider or pharmacy. The amount of HIV virus in your blood may increase if one or more of the medicines are stopped, even for a short time.
- Stay under the care of a healthcare provider while using LEXIVA.
- It is important that you do not miss any doses. If you miss a dose of LEXIVA by more than 4 hours, wait and take the next dose at the regular time. However, if you miss a dose by fewer than 4 hours, take your missed dose right away. Then take your next dose at the regular time.
- If you take too much LEXIVA, call your healthcare provider or poison control center right away.

What should I avoid while taking LEXIVA?

- **Do not use certain medicines while you are taking LEXIVA.** See "What is the most important information I should know about LEXIVA" and "Who should not take LEXIVA?"
- **Do not breastfeed. See "Before taking LEXIVA, tell your healthcare provider". Talk with your healthcare provider about the best way to feed your baby.**
- **Avoid doing things that can spread HIV infection** since LEXIVA doesn't stop you from passing the HIV infection to others.
- **Do not share needles or other injection equipment.**
- **Do not share personal items that can have blood or body fluids on them, like toothbrushes or razor blades.**
- **Do not have any kind of sex without protection.** Always practice safer sex by using a latex or polyurethane condom to lower the chance of sexual contact with semen, vaginal secretions, or blood.

What are the possible side effects of LEXIVA?

LEXIVA may cause the following side effects:

- **skin rash.** Skin rashes, some with itching, have happened in patients taking LEXIVA. Tell your healthcare provider if you get a rash after starting LEXIVA.
- **diabetes and high blood sugar (hyperglycemia).** Some patients had diabetes before taking LEXIVA while others did not. Some patients may need changes in their diabetes medicine. Others may need a new diabetes medicine.
- **increased bleeding problems in some patients with hemophilia.**
- **worse liver disease.** Patients with liver problems, including hepatitis B or C, are more likely to get worse liver disease when they take anti-HIV medicines like LEXIVA.
- **changes in blood tests.** Some people have changes in blood tests while taking LEXIVA. These include increases seen in liver function tests and blood fat levels, and decreases in white blood cells. Your healthcare provider may do regular blood tests to see if LEXIVA is affecting your body.
- **changes in body fat.** These changes have happened in patients taking antiretroviral medicines like LEXIVA. The changes may include an increased amount of fat in the upper back and neck ("buffalo hump"), breast, and around the trunk. Loss of fat from the legs, arms, and face may also happen. The cause and long-term health effects of these conditions are not known at this time.

Common side effects of LEXIVA are nausea, vomiting, and diarrhea. **Tell your healthcare provider about any side effects that bother you or that won't go away.**

This list of side effects of LEXIVA is not complete. For more information, ask your healthcare provider or pharmacist.

How should I store LEXIVA Tablets?

- Store LEXIVA Tablets at room temperature between 59° and 86°F (15° to 30°C). Keep the container tightly closed.
- **Keep LEXIVA and all medicines out of the reach of children.**
- Do not keep medicine that is out of date or that you no longer need. Be sure that if you throw any medicine away, it is out of the reach of children.

General information about LEXIVA

Medicines are sometimes prescribed for conditions that are not mentioned in patient information leaflets. Do not use LEXIVA for a condition for which it was not prescribed. Do not give LEXIVA to other people, even if they have the same symptoms you have. It may harm them.

This leaflet summarizes the most important information about LEXIVA. If you would like more information, talk with your healthcare provider. You can ask your pharmacist or healthcare provider for information about LEXIVA that is written for health professionals. For more information you can call toll-free 888-825-5249 or visit www.LEXIVA.com.

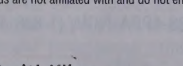
What are the ingredients in LEXIVA?

Active Ingredient: fosamprenavir calcium.

Inactive Ingredients: colloidal silicon dioxide, croscarmellose sodium, magnesium stearate, microcrystalline cellulose, and povidone K30. The tablet film-coating contains the inactive ingredients hypromellose, iron oxide red, titanium dioxide, and triacetin.

LEXIVA Tablets, 700 mg, are pink in color and are capsule-shaped, with the letters "GX LL7" printed on one side of the tablet.

R_x only



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GlaxoSmithKline
GlaxoSmithKline
Research Triangle Park, NC 27709

VERTEX
Vertex Pharmaceuticals Incorporated
Cambridge, MA 02139

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In The Black:

Strategies for Planning Ahead & Moving Forward

by Dane A. Campbell, a Financial Representative with the NEMEC Financial Group of The Northwestern Mutual Financial Network

LIFE IS FULL OF SURPRISES. When two people decide to enter a long term relationship, it is usually a joyous experience. While the jubilation can be fleeting (if separation or death occurs), it's important to make some serious decisions. That's why proactive planning can make a world of difference.

Planning Ahead

Early preparation can help a couple have greater peace of mind now and down the road. Here are strategies to jumpstart the process:

• **START THE CONVERSATION** - The first step is to begin a dialogue with one's partner and family – as difficult as that conversation may be.

• **KNOW WHAT YOU HAVE** – Familiarize yourself with all of your – and your partner's – assets, even if he is the "financial decision maker" in the family. Learn about all bank accounts, retirement accounts, tax returns, insurance coverage, life insurance policies, etc.

• **DEVELOP A WILL** – Putting together a will can help couples think through and solidify financial and personal matters. This will give you (and him) a say in where your assets go – without the courts making the decision for you.

It may help to schedule a consultation with a financial professional, a family, or estate attorney. Their expertise can help you ask the right questions, identify your needs, define goals, and make key decisions.

Build Wealth

There's no reliable way to get rich quick. However with proper planning, people can amass a sizeable estate by using good judgment and some savvy investing. Be consistent: the foundation for wealth accumulation is defensive planning. Couples need to create "safety nets" to help protect against loss. This can be achieved with life insurance and disability income insurance. Once a strong baseline is in place, the second step is to begin the investment stage. Investment options should be chosen on the basis of suitability (how appropriate it is to your needs) and objective (what the purpose of the money is). To protect against tax consequences, couples often name each other as beneficiaries and may also place the proceeds in a trust, which is a way to have money managed by an entity for the benefit of another person. Of course, this scenario is not appropriate for *every* couple, but it is a common solution.

Death and Taxes

In this country the unfortunate fact is that tax laws are written specifically for heterosexual couples. There is little – if any – legal protection for same sex couples. The result is often times a slew of estate taxes and the litigation that almost always follows a death or separation. Citizenship also plays a huge role. All residents of the U.S. are generally taxed the same at death, regardless of citizenship status. However, there is an important difference in the way citizens and non-citizens can transfer money *especially* when they are not technically "married." If the surviving partner is not a US citizen, the only way to defer estate taxes until the second death is to place money (in excess of the current $2 Million estate tax exemption) into a special trust called a Qualified Domestic Trust or "QDOT." With this, Uncle Sam is willing to wait until the second partner dies to collect the estate tax. A QDOT may not be the answer for everyone in this situation. Some alternatives to help you achieve your financial goals despite not being married are:

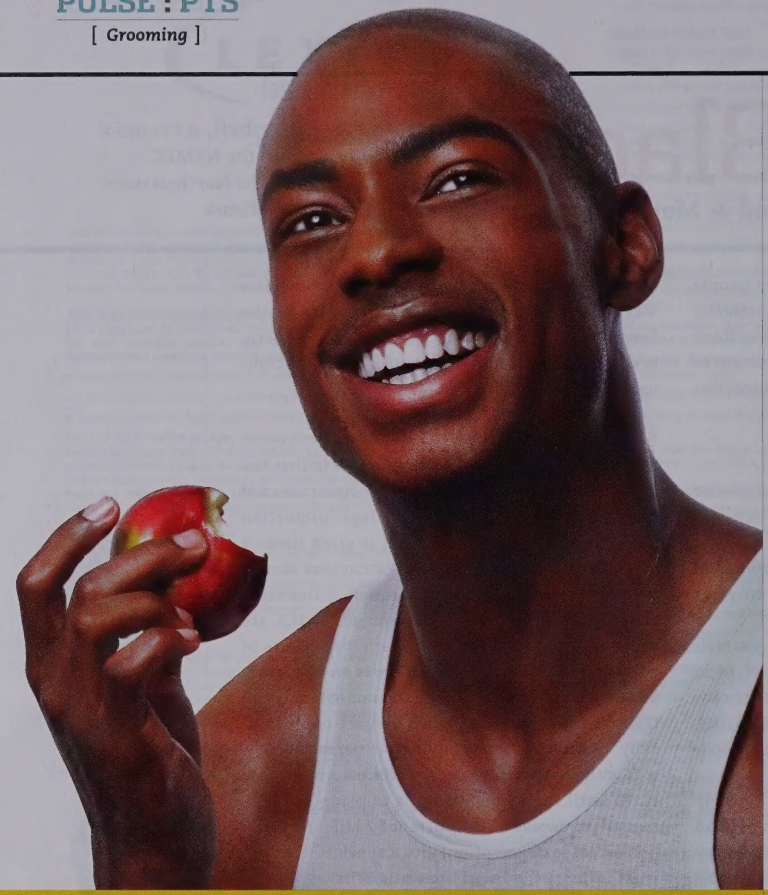
• **PURCHASE LIFE INSURANCE**. Life insurance is one way to provide the surviving partner with immediate tax free money.

• **GIVE IT AWAY NOW**. giving property to a non-citizen partner during THEIR LIFETIME is oneway to minimize the gifting restrictions. Currently, up to $117,000 can be transferred each year without gift tax if the receiving person is a non-citizen.

Finally, perhaps the most important place to begin is with a plan. Start the discussion, create a list of concerns and objectives, and seek advice.

Contact Dane by phone at (212) 819-1800 or visit, www.nmfn.com/danecampbell.

Photo by Daniel Green



An apple a day keeps the dentist away...

MAINTAINING GREAT oral hygiene pays dividends way into your senior years. The American Dental Association (ADA) recommends that you:

- Visit your dentist every six months for professional cleanings and oral exams.
- Brush your teeth *(with ADA-approved fluoride toothpaste)* and floss twice daily to prevent tooth decay, gum disease, and other oral hazards.
- Replace your toothbrush every three months, or when the bristles appear worn or frayed.
- Limit between-meal snacking and sugary foods that lay on the teeth and gums for extended periods of time.

Don't worry so much about the receding hairline and the extra pounds; one sure-fire way to take years off your appearance is by whitening your teeth, either with a home or professional whitener. Each time you smile, you will feel more confident and approachable. Don't know where to start? No problem. You know we always keep you on the PULSE!!! Here are a couple of ways to keep those beautiful white piano keys in tune.

PEARLY WHITES

by **Chad L. Groom**

Plus White 5 Minute Speed Whitening Gel - *One step bleaching power—fast and easy. In just five minutes your teeth will experience effective bleaching action. For very stained teeth, leave gel on for 15 to 20 minutes. Use twice a day for two weeks, then continue once a week to maintain the desired whitening level. This gel can be used with mouth trays for excellent results.*

Crest Whitestrips Renewal - *Age-Defying Strips reduce the physical of aging on teeth. This enamel safe formula is infused with the same ingredients dentists use.*

Crest Whitening Rinse - *This triple action mouthwash whitens teeth, protects against stains, and kills bad breath germs. It is alcohol free with a fresh mint taste.*

Oral-B Rembrandt Whitening Pen - *An effective all-in-one spot treatment gel for stubborn stains and discoloration of teeth.*

Aquafresh White Trays - *These flexible trays are easy to apply; they mold securely around your teeth allowing the fresh tasting gel to whiten even between teeth. Your teeth will visibly whiten in three days.*

Crest Vivid White Night - *Crest Vivid White Night is a nightly toothpaste that coats your teeth, loosening surface stains to help you brush them away in the morning the final result powerful whitening for a healthy, beautiful smile.*

Photo by Tarrice Love, Product Photo: Daniel Green, Stylist: Shaun Christopher Levy, Model: Corey - Identities Inc. Grooming: Douglas Snuggs

CLOSE SHAVE

The daily ritual of shaving is something many of us don't look forward to. The raging battle with ingrown hairs, skin irritation, discoloration and razor bumps can leave scars which are not only physically unappealing, but can affect a person's level of confidence. To the rescue comes a surge of great new products just for us.

The Art of Shaving consistently masters a man's daily shave routine. Its dedication to the science of aromatherapy is the foundation of their product philosophy. The Art of Shaving expertly designs and handcrafts each razor to ensure optimum comfort and balance. Their badger brushes represent elegance and durability. Visit: theartofshaving.com

PULSE Picks:

From The Art of Shaving

INGROWN HAIR NIGHT CREAM

Effectively accelerates the relief of ingrown hairs and razor bumps. Pure, unrefined African shea butter softens the skin, allowing ingrown hairs to break free, as jojoba oil moisturizes and unclogs pores. White willow bark and meadowsweet extract, containing salicilin, gently exfoliate and release trapped hairs. Therapeutic essential oils reduce inflammation, while botanical extracts rich in fruit acids improve the skin's texture. This product provides a 93% reduction of ingrown hairs within six weeks. For all skin types 1.7 fl. oz. - $40

From BARC

BUMP DOWN

If you should still experience some shaving irritation, Barc has come up with the perfect alcohol-free razor bump repair treatment, aptly named bump down. Visit getbarc.com for more information.

From Carol's Daughter, NYC

GORDON'S SHAVING LOTION

A baby smooth shave for the man in the mirror. It's just what the doctor ordered. Smooth on this non-irritating, skin-softening shaving lotion. Follow with Carol's Daughter's Rose and Chamomile Toner to freshen your skin and tighten your pores, infused with rose, chamomile, juniper berries and vodka. Visit: carolsdaughter.com

THE MAGNIFICENT 7

IMPULSE

THESE SEVEN YOUNG 'IT' MODELS from the agency Identities Inc., NYC all possess great looks, remarkable intelligence, and unique personalities. Über agent Tim Harris, the master mind behind Identities, says "You can see star quality shining through a model's newness." His stable of thoroughbreds are the newest stars of countless national ads, runway shows, television commercials, and fashion editorials. PULSE is proud to introduce this stellar lineup that is destined for the top.

With handsome good looks from a blend of African American and Dominican ancestry, **JASON DANZA** is the new face of a multi-ethnic global society. His distinctive eyes and lean, slick body are sure to garner him a permanent place in the world of high fashion.

A brand new face and appearing in his first editorial, **COREY MIDDLETON** has a perfect blend of youthful innocence and sensuality. His megawatt smile, bright eyes, and trim swimmer's build make him absolutely magnetic and the quintessential boy next door.

SIDNEY WILSON is "The Body" with the superhero-like physique. This celebrity personal trainer has modeled for *Men's Health* and recounts Rocawear, Calvin Klein, Ralph Lauren, and Timberland among his favorite clients.

FRANK GUYTON's deep-set eyes, rugged sex appeal, and stature make him a favorite of designers Rocco Barocco, Ermenegildo Zegna, and Paul Zileri and have landed him editorials in *GQ South Africa* and *Primo Emporio*.

LAWRENCE ANNUNZIATA has editorials for many magazines like *M.R.*, *Drum*, and *Platinum* to name a few. With bookings for Enyce and, more recently, an Escada TV commercial, his striking face and flawless skin, really make him a standout.

JOSH COSTA's cinema good looks have landed him numerous modeling assignments and the lead role in his first feature Indie film *Cross to Cannon Valley*, produced by legendary director Francis Ford Coppola.

A quiet earthquake of sensuality and allure, **DANIEL BLALOCK** has been causing quite a stir in the fashion industry. He's booked Timberland, Abercrombie & Fitch, J.C. Penney, Target, and countless editorials. Industry insiders are already heralding him as the face of 2008.

Photographed by: **Fadil Berisha**
Stylist: **Llewellyn Jenkins**
Assistant Stylist: **Chad L. Groom**
Hair: **Vincent Lindsey Green**
Grooming: **Lenny Hamilton**

Kenwyn's
Silk jacket by CANALI $695
Floral shirt by JOHNNY KENT $96
Floral Jean by FORNITURE CIVILI $120
Sandals by HERMES $375
You are invited to our
Garden Party
Attire: Floral 'your way'
Photographed by
LUIZ ANTONIO
Fashion Director:
LLEWELLYN JENKINS

Orrin's
Shirt by Just Cavalli $450
Pink pant by Whipcord $80

Lawrence's
Floral Jean by D&G $525
Silk Shirt by Etro $475
Flip Flops by H&M $6

Daniel's
Nehru shirt by Roberto Cavalli $275
Black Short by Marc Jacobs $325
Fragrance - CK One Summer
by Calvin Klein

Raphael's
Floral Shirt by JOHNNY KENT $96
Polished cotton pant by SIMBOLS $92
Hat by ANTHONY MAXWELL NEW YORK *(price upon request)*
Fragrance - Hugo by HUGO BOSS

Kenwyn's
Lime Floral shirt by JOHNNY KENT $96
Lime flat front jean by FEUME $94

Frank's
Shirt by SCOTT LANGTON $180
Pant by LUCK IN LUCK $80
Flip Flops by H&M $5.90

Assistant Stylist:
Chad L. Groom
Home Furnishings Editor:
Lorenzo McCain
Table Designs by:
Crate & Barrel
Food Stylist:
Terence Taitt
All Food by:
Fresh Direct
Grooming:
Vincent Lindsey Green
Floral Designs by:
Margaret Malendrino
Garden courteous of
Kim Sales & Thomas Crawley

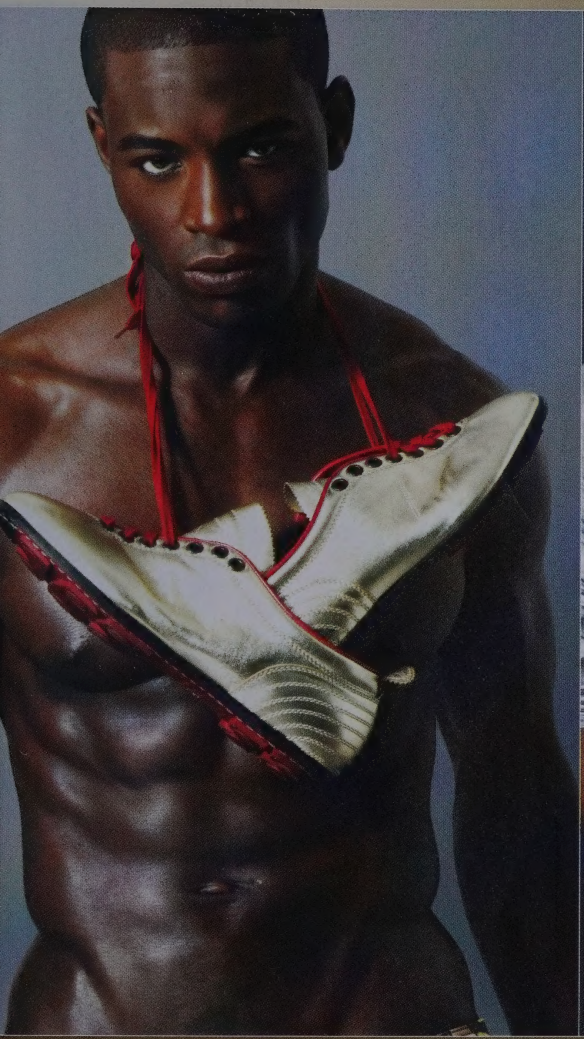
KILLAH SHORTS

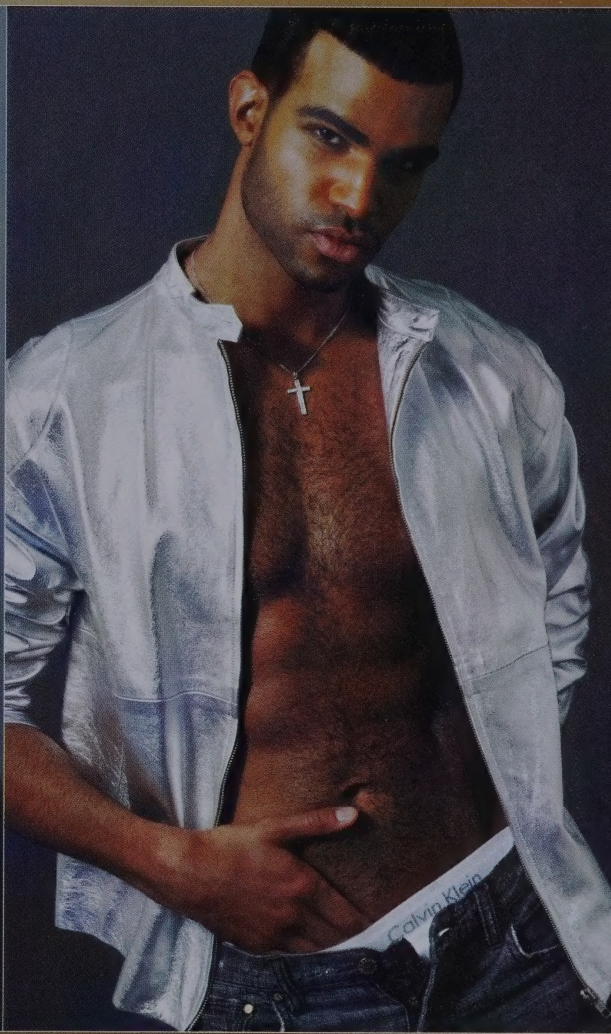
SLAY 'EM ALL SUMMER *long in everything from three-quarter khakis and crisp plaid preppies to Dolce Gabbana "Fight Club" boxing shorts. Here are some the season's best cutoffs...*

ON JABAR: *Tank by* **Fruit of the Loom**, *Short by D&G $320, Socks by* **Wilson** *$7.*

IN BASKET: *Dark denim cutoffs by H&M $50, Cocoa cargo short by* **American Eagle** *$39, Black printed short by* **Uncut NYC** *$42, Blue plaid short by* **Abercrombie & Fitch** *$59, Khaki short by* **Brooks Brothers** *$80, Green plaid short by* **Old Navy** *$15*

Photographer: **William Elliot Springfield**
Stylist: **Llewellyn Jenkins**
Assistant Stylist: **Chad L. Groom**
Grooming: **Douglas Snuggs**





Photographed by: Fadil Berisha. Stylist: Llewellyn Jenkins. Assistant Stylist: Chad L. Groom. Grooming: Vincent Lindsey Green

Editor's Find

Summer Report

Precious Metals

THE GOLD RUSH OF '07 IS ON and gold sneakers are the BIG "must have" accessory this summer. Everyone from ***Nike*** to ***Dirk Bikkembergs*** has a brand new shiny pair in stores nationwide. My pick is this slick offering by ***Pantofolo D'oro $175*** that I found at ***Tootsi Plohound NYC***. *...I'm livin' my life like it's golden this summer!*

Not to be outdone, silver is showing up in everything from eyewear to clothing. Frank's thin leather jacket by ***DKNY $675*** caught my eye, giving a silver lining to those brisk summer evenings. Underwear by ***Calvin Klein $16***, Jeans by ***Ernest Sewn $270***, Necklace by ***Tiffany & Co. $575***.

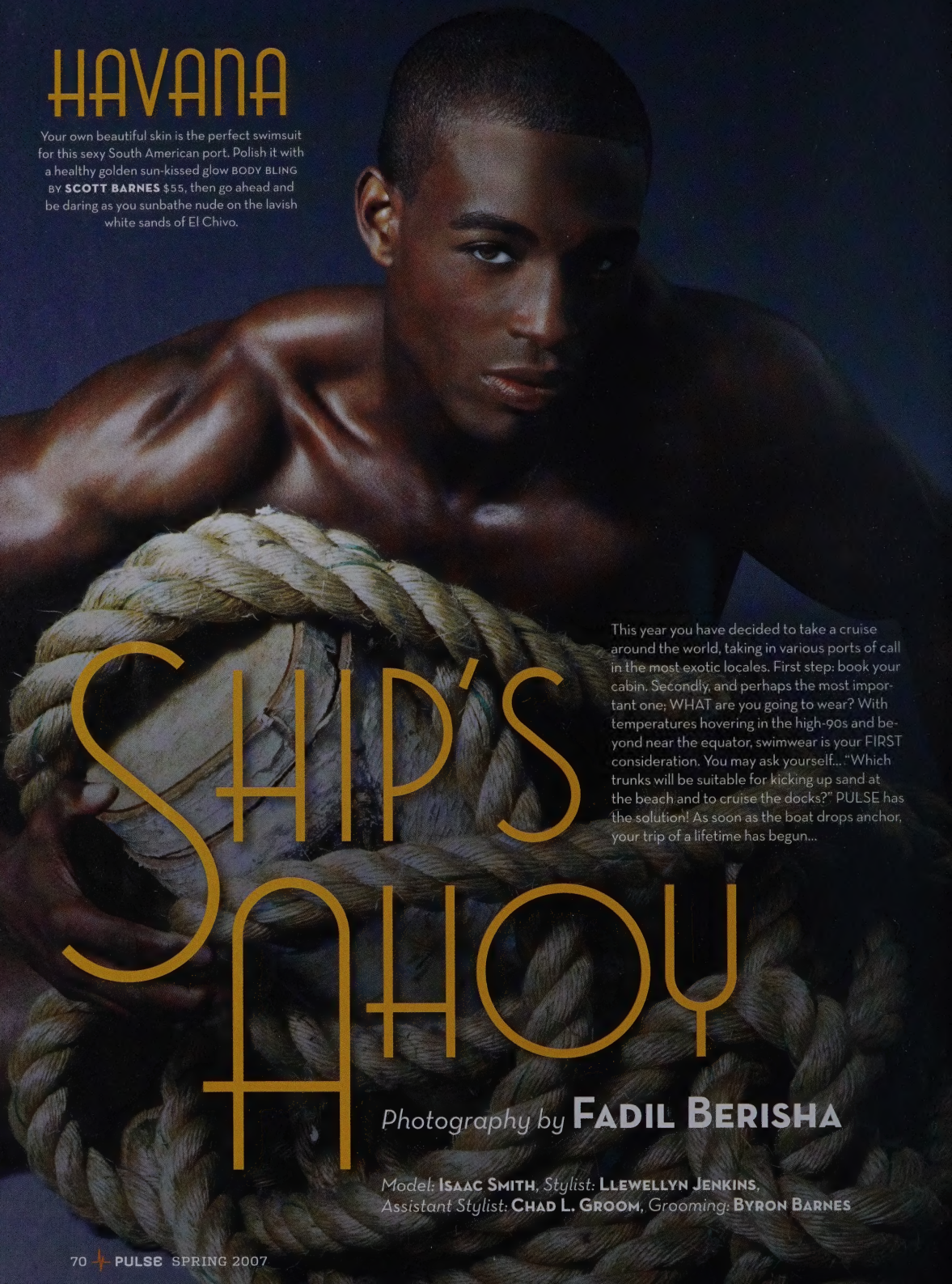
Hold Everything

A nice travel bag separates you from the fray; but this bright neon tote by ***Piquadro $320*** puts you in a class all your own. It's roomy enough to hold all of your personals, as well as an extra bathing suit, a bottle of water, and your favorite summer time novel.
Trunks by ***Watersport $40***

By the Numbers

A little SHADE never hurt anyone, especially between 11am and 3pm when the UV index is at its highest; but for added skin protection, treat yourself to a sunscreen product with an SPF (sun protection factor) of at least 15—the higher the number the greater the protection. Smooth on ***Bliss Ray of Hope SPF 20 $38***.

Yes, you may be melanin rich and believe that sunscreens are only for fairer skins, but after thirty minutes in the sun even the deepest skin tones are at risk for sun damage. To shield your sensitive eyes from the harsh glare of the sun, slip on a pair of ***Christian Dior, Sport 1 sunglasses $300***, with 100% UV protection to improve your sexy.



HAVANA

Your own beautiful skin is the perfect swimsuit for this sexy South American port. Polish it with a healthy golden sun-kissed glow BODY BLING BY **SCOTT BARNES** $55, then go ahead and be daring as you sunbathe nude on the lavish white sands of El Chivo.

SHIP'S AHOY

This year you have decided to take a cruise around the world, taking in various ports of call in the most exotic locales. First step: book your cabin. Secondly, and perhaps the most important one; WHAT are you going to wear? With temperatures hovering in the high-90s and beyond near the equator, swimwear is your FIRST consideration. You may ask yourself... "Which trunks will be suitable for kicking up sand at the beach and to cruise the docks?" PULSE has the solution! As soon as the boat drops anchor, your trip of a lifetime has begun...

Photography by **FADIL BERISHA**

Model: **ISAAC SMITH**, *Stylist:* **LLEWELLYN JENKINS**,
Assistant Stylist: **CHAD L. GROOM**, *Grooming:* **BYRON BARNES**

SAINT TROPEZ

Decidedly American style makes a big splash on the French Riviera.

Track Jacket $125 & Trunk $75
both by **Andrew Nowell**
Bucket Hat $30 & Tote $75
both by **LeSportsac**
Watch by **Kenneth Cole** $125

MYKONOS

The Greek gods are smiling since you are the antithesis of the classic male form.

TRUNK $125 & SLEEVELESS HOODED SWEATSHIRT $300
BOTH BY **VERSACE**

BALI

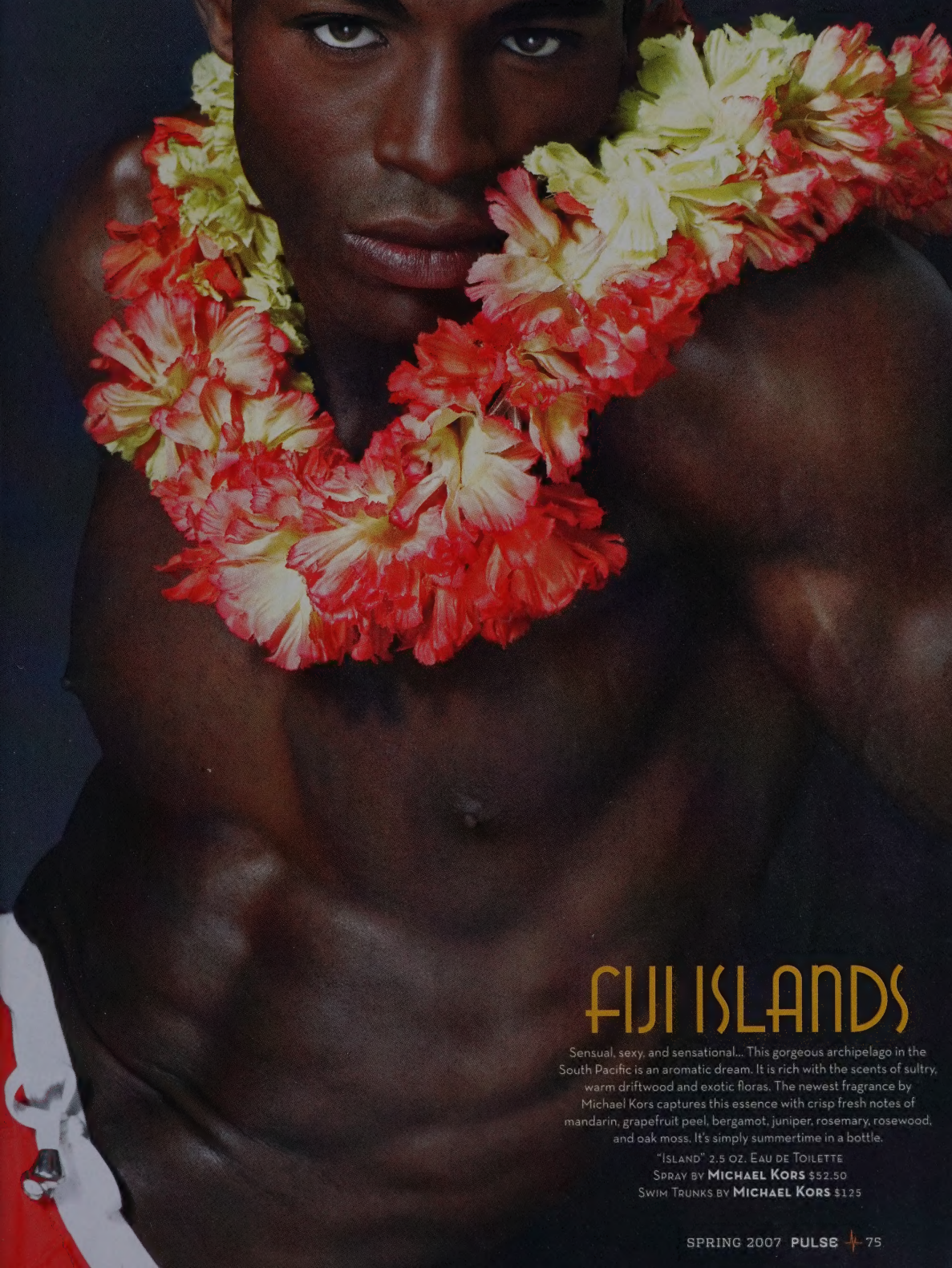
Sparkling waters, balmy skies and bask in the intoxicating beauty that is Indonesia.

TRUNK $125 & HEAD WRAP $270
BOTH BY **JEAN-PAUL GAULTIER**
VINTAGE BELT BY **ELSA PERETTI**
TASSELED CASHMERE ROBE
BY **LORO PIANA** $2,490
SUPER SHIELD SKIN SAVER SPF 30
BY **SEPHORA SUPERSTARS** $18

IBIZA

Before and after you hit the legendary clubs in Ibiza, frolic on the beach at Cala Bassa.

TRUNK BY **ROBERTO CAVALLI** $125
BRAZILIAN BRONZING SHEEN BY **BECCA** $26



FIJI ISLANDS

Sensual, sexy, and sensational... This gorgeous archipelago in the South Pacific is an aromatic dream. It is rich with the scents of sultry, warm driftwood and exotic floras. The newest fragrance by Michael Kors captures this essence with crisp fresh notes of mandarin, grapefruit peel, bergamot, juniper, rosemary, rosewood, and oak moss. It's simply summertime in a bottle.

"ISLAND" 2.5 OZ. EAU DE TOILETTE
SPRAY BY **MICHAEL KORS** $52.50
SWIM TRUNKS BY **MICHAEL KORS** $125

THE ISLE OF CAPRI

Blend into "The Blue Island".

JACKET $25 AND TRUNK $80 BOTH
BY **MISSONI SPORT**
JEWELRY BY **ROXANNE ASSOULIN NYC**
(PRICE UPON REQUEST)
WATCH BY **NIKE SPORT** $90
"UNFORGIVABLE" 2.5 OZ.
EAU DE TOILETTE SPRAY
BY **SEAN JOHN** $55

ST. BARTHS

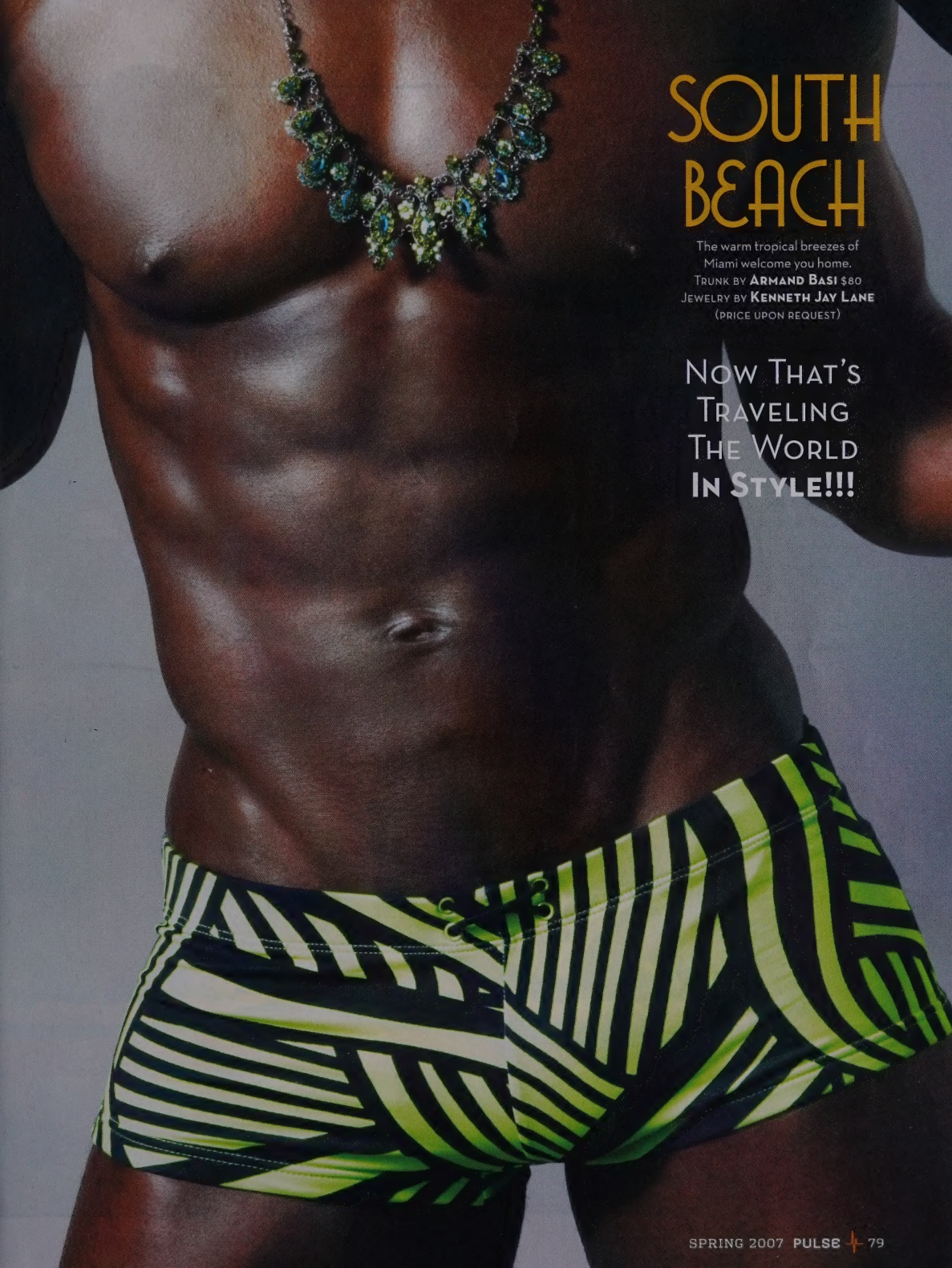
Gallivant around the French West Indies.

LOGO TRUNK BY **GUCCI** $180
TANK BY **HANRO OF SWITZERLAND** $39
ARMBAND BY **AMERICAN APPAREL** $7
SUPERSTAR SHOES BY **ADIDAS** $125
AVIATOR GLASSES BY **MODERN AMUSEMENT** $175
BASEBALL CAP BY **NEW ERA** $25
BAG BY **H&M** $5
NECKLACE BY **ALDO** $15

MONTE CARLO

The Monaco Grand Prix isn't the only thing that'll be racing once you hit Larvotto Beach.

Trunk by **Emilio Pucci** $130
Goggle by **Nike Sport** $20
Water of Choice **Evian**



SOUTH BEACH

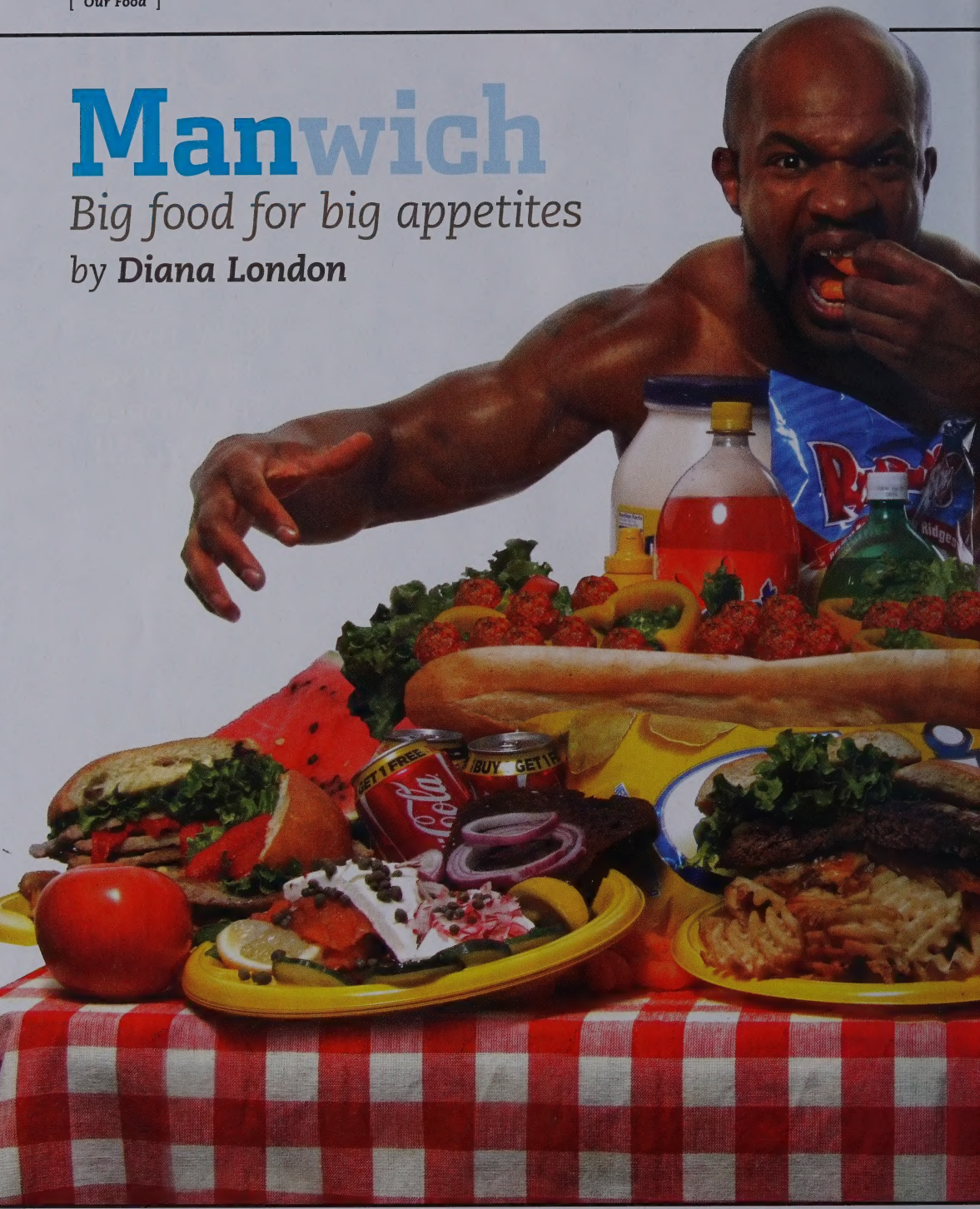
The warm tropical breezes of Miami welcome you home.
TRUNK BY **ARMAND BASI** $80
JEWELRY BY **KENNETH JAY LANE** (PRICE UPON REQUEST)

NOW THAT'S TRAVELING THE WORLD **IN STYLE!!!**

Manwich

Big food for big appetites

by **Diana London**



IT HAS BEEN SAID that the *expressway* to a man's heart is through his stomach. So, put your plan into overdrive. If you are a BIG hungry man or trying to feed one, then a fat juicy **MANWICH** is all the turbo power you'll need.

Stuff your face with supersized sandwiches piled high on hardy bread, with delicious meats, savory cheeses, grilled vegetables, all the fixins, and an ice-cold 2-liter Pepsi. Now, that's a meal!

Forget about low-carb intake, calorie counting, and fat ratios...*indulge your bulge* and enjoy. Don't worry; you'll slim down in time for swim suit season next year.

Jabbar's big man appetite is satisfied with these five supersized manwiches from **Bar 89** in New York City located at 89 Mercer Street. YES, without a doubt...BIGGER IS BETTER!

▶ Pork Chop II

Grilled in teriyaki sauce, topped with grilled onions, pecans, sliced green apples, and Bleu cheese dressing. Served on a toasted Italian roll with fries.

▶ S.S.S.

Scotland's finest thinly sliced, smoked salmon served open-face on dark rye with red onions, cream cheese, cornichons, and capers.

▶ Burger Las Brisas

Topped with melted Monterey Jack cheese, avocado, jalapeño peppers, lettuce, onions, and a bit of salsa sauce.

▶ The Cheeseburger

Topped with one or all of the following cheeses: American, Swiss, Colby, or aged white Cheddar.

▶ Country Cousin

Thinly sliced breast of chicken stacked on white or whole wheat toast, with avocado, sliced red onion, lettuce, bacon, and Hellmann's mayonnaise. Served with fries.

Photographed by **Tarrice Love**
Stylist: **Llewellyn Jenkins**
Assistant Stylist: **Chad L. Groom**
Grooming: **Douglas Snuggs**

TOSS MY SALAD

SUMMER IS THE SEASON when you think of vivid colors; flowers in bloom, succulent fruits and veggies, wholesome foods, and light comfy clothes. At this same time many people forgo paunch-producing power lunches and heavier comfort foods opting for lighter fare like delicious salads. Not only do they taste great, they're extremely healthy and more waistline friendly. Salads are a great way to showcase farm fresh produce and, although they may appear simple, each creation by nature blends nutrition in a complex array of the freshest, tastiest ingredients.

Salads need not be boring or a challenge. Fret not! You don't have to be a gourmet chef to make one perfect. Indeed, with a salad it's hard to go wrong since there's so much room for creativity and inventiveness. If your taste buds yearn for more flavor, just add a helping of your favorite this or that to the mix.

Visit your local farmers' market and let your imagination go wild over the range of vitamin-rich delights from good old Mother Earth. Savor aromas of ripened flesh-bearing fruits and fragrant fresh herbs wafting through the air to stimulate your culinary instincts. For that special touch, present your guests salads enhanced with edible flowers. Some favorites are chive blossoms, daisies, roses, and pansies. Their inclusion elevates a dish's visual appeal and adds to their tastes, if used sparingly. They're pretty to look at, but never too pretty to eat.

Try one of our recipes. Your friends will admire how well you've tossed their salad. Bon appétit!

Crab Romaine Salad

A tantalizing treat is crab romaine salad—a union of both land and sea. This mouthwatering, refreshing salad is a cool breeze to the taste buds that you and your friends will enjoy time and again this season.

1 head of Romaine lettuce, 1/8 cup black olives, 1 cup cherry tomatoes, 1 beet processed (slice to desired size), 1 cucumber, 1/2 green pepper, 1/2 red pepper, 1/2 red onion, 2 vine ripe tomatoes (slice to desired size), 1 cup King crab (slice to desired size), Salad dressing (optional)

Toss romaine, black olives, cherry tomatoes, sliced beets, and cucumbers in a large bowl. Then, add green pepper, red pepper, red onion, and sliced tomato on the top of the salad in a decorative array. If desired, complete your salad by adding your favorite salad dressing. Serves 4

Salad with Goat's Milk Yogurt Dressing

With two powerfully distinct flavors—peppery arugula and earthy goat's milk yogurt—enhanced by garlic, shallots, chives and pine nuts, this is a winner every time.

1/2 cup goat's milk yogurt, 1 teaspoon minced shallot, 1/4 teaspoon on minced garlic, Fine sea salt, Freshly ground white pepper, 1 1/2 teaspoon chives, thinly sliced, 2 large bunches of arugula, stems removed & thoroughly rinsed, 1/4 cup pine nuts, toasted & coarsely chopped.

In small bowl, whisk yogurt, shallot and garlic. Season with salt and pepper. Whisk in the chives. Cover and refrigerate (can be done earlier in the day). To serve, place the arugula and nuts in a large bowl. Lightly season to taste with salt and pepper. Add enough dressing to lightly coat the arugula, and toss. Serve immediately. Serves 4

Avocado & Papaya Salad with Sesame Dressing

This salad is an international summer sensation with an exotic mix of papaya, avocado, and sesame.

Toasted sesame seeds, 3 tablespoons granulated sugar, 1/2 teaspoon dry mustard, 1/4-1/2 teaspoon hot pepper sauce, 1/2 teaspoon paprika, 1/2 teaspoon Worcestershire sauce, 1 cup vegetable oil, 1/3 cup fresh lime juice, Salt to taste, Freshly ground black pepper to taste, 4 bunches of watercress, washed & stemmed, 2 ripe avocados peeled, pitted & sliced, 2 ripe papayas peeled, seeded, & sliced (rinse & keep half of seeds), 1 medium red onion peeled & sliced into thin rings

Whisk together first 10 ingredients in bowl, and reserve. Arrange a bed of watercress on a large serving platter. Alternate slices of avocado and papaya over watercress and scatter red onion and papaya seeds over all. Pour over reserved dressing, and serve. Serves 6 to 8.

Photographed by **Daniel Green**
Styled by **Lorenzo McCain**

Shira Leah $48

Daffy's $24

So you have the recipes, you've made the salads! Now, just make sure they're BEST DRESSED in one of these stunning bowls.

Pier 1 Imports $35

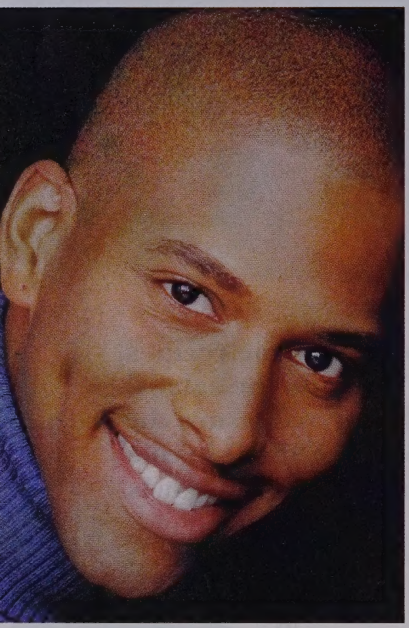
Pier 1 Imports $25

Daffy's $25

It's ALL About Nathan Williams

By Keith Boykin
(Nathan's Man!)

An interview with producer, promoter and entertainment attorney.



"Home is home. And, family is family. You have to know what's important and cultivate those gardens just as much as you cultivate your career."

WHEN PULSE MAGAZINE asked me to do this interview, I was stumped. I do interviews all the time, but I have never interviewed my own spouse. That's why I had to do this article about Nathan Hale Williams.

Nathan wears many hats. Some people know him as an event promoter in New York City, although more know him as a successful filmmaker. Quite a few people know him from his role as the evil bitch Byron in the film *The Ski Trip*, and still some remember him as my campaign manager in the 2004 Showtime television series *American Candidate*.

As an entertainment lawyer, Nathan has represented Billy Porter, Tammy Ford, Barbara Tucker, and many others. And he's interviewed Yolanda Adams, Patti Labelle, Monique, Chaka Khan, and others as a producer for his new reality show *Real Life Divas*.

So, which hat would he wear for this interview? I asked him to wear all of them. Nathan has boundless energy to match his boundless career. But as his partner, I get a sneak peek at the man behind the man. Today, I want to share a little bit of what goes on behind-the-scenes.

KEITH BOYKIN: *You went to Whitney Young High School in Chicago with a lot of other talented young black kids. How did that experience shape your future?*

NATHAN HALE WILLIAMS: I tell everyone who will listen how much I love my high school and the experience I had there. Whitney Young was a very special school. Not only was it the #1 ranked school in the city; it was also the only nationally ranked school that was predominantly black (66% at the time). Truly, it shaped my drive, work ethic, and discipline. I was surrounded by brilliant, overachieving black students and so, excellence really wasn't a choice. At my school, if you wanted to be noticed you had to be amazing. It really has stuck with me ever since then and I try to strive for excellence in everything I do. Go Dolphins!

KB: *You're a filmmaker, TV producer, entertainment lawyer, party promoter, writer, and so much more. How do you have time to do it all?*

NHW: The answer is I really don't know. I am always busy, but I like it that way. I am a very hyper person and sitting still drives me absolutely crazy. I think I have developed some mild case of A.D.D. Sometimes it gets to be really overwhelming, but I do have a good support system of friends and family that I call on to keep me centered. So, the basic answer is that I don't really have the time to do it all...I just keep going until I am at the verge of meltdown (sometimes after) and then, take a break...and do it all over again.

KB: *What was it like acting in the movie The Ski Trip?*

NHW: *The Ski Trip* was a ball. The cast was absolutely amazing. I mean, we didn't have anything. We ate bologna sandwiches and tater tots for lunch because that's all they had. Oh yeah, and really bad chili. But, it was so cool because we were all making our first movie. The actual character, Byron, was enormously gratifying to play. I got to play a bitch! However, it wasn't your average bitch...this bitch was the conscience of the film. I love the response I get from people when they first meet me and they've only known me as Byron. I always have to say, "I don't act like that." Well, not most of the time.

KB: *How do you balance your personal life with all that's going on in your career?*

NHW: Home is home. And, family is family. You have to know *(con't on page 87)*

Right now Jesse is fighting HIV.

REYATAZ, a protease inhibitor (PI) taken in HIV combination therapy*:

- **Can help raise your T-cells**
- **Can help lower your viral load to undetectable†**
- **Low chance of diarrhea** (shown in clinical trials)‡

*People who have taken anti-HIV medicines before usually take REYATAZ with ritonavir once daily as part of their HIV combination therapy.

† Undetectable is defined as a viral load of less than 400 or 50 copies/mL (depending on the test used).

‡ REYATAZ in combination therapy had a 1-3% rate of moderate-to-severe diarrhea.

REYATAZ does not cure HIV, a serious disease, or help prevent passing HIV to others.

REYATAZ® (atazanavir sulfate) 200 mg/300 mg capsules

ASK YOUR DOCTOR if REYATAZ, in HIV combination therapy, can help you **fight HIV your way.**

REYATAZ® (atazanavir sulfate) Capsules

INDICATION: REYATAZ (atazanavir sulfate) is a prescription medicine used in combination with other medicines to treat people who are infected with the human immunodeficiency virus (HIV). REYATAZ has been studied in 48-week trials in both patients who have taken or have never taken anti-HIV medicines.

REYATAZ does not cure HIV or help prevent passing HIV to others.

IMPORTANT SAFETY INFORMATION:

Do not take REYATAZ if you are taking the following medicines: ergot medicines, Versed® (midazolam hydrochloride), Halcion® (triazolam), Orap® (pimozide), Propulsid® (cisapride), Camptosar® (irinotecan hydrochloride), Crixivan® (indinavir sulfate), Mevacor® (lovastatin), Zocor® (simvastatin), rifampin, St. John's wort (*Hypericum perforatum*), AcipHex® (rabeprazole sodium), Nexium® (esomeprazole magnesium), Prevacid® (lansoprazole), Prilosec® (omeprazole), or Protonix® (pantoprazole sodium). Do not use Viagra® (sildenafil citrate), Levitra® (vardenafil HCl), Cialis® (tadalafil), Vfend® (voriconazole), Advair® (fluticasone propionate and salmeterol inhalation powder), Flonase® (fluticasone propionate), or Flovent® (fluticasone propionate) while you are taking REYATAZ (atazanavir sulfate) without first speaking with your healthcare provider. **This list of medicines is not complete. Discuss all prescription and non-prescription medicines, vitamin and herbal supplements, or other health preparations you are taking or plan to take with your healthcare provider.**

Tell your healthcare provider right away if you have any side effects, symptoms, or conditions, including the following:

- **A change in the way your heart beats** may occur and could be a symptom of a heart problem.
- **Diabetes and high blood sugar** may occur in patients taking protease inhibitor medicines like REYATAZ.
- **Yellowing of the skin and/or eyes** may occur due to increases in bilirubin levels in the blood (bilirubin is made by the liver).
- **Rash** (redness and itching) sometimes occurs in patients taking REYATAZ, most often in the first few weeks after the medicine is started, and usually goes away within two weeks with no change in treatment.
- **If you have liver disease,** including hepatitis B or C, your liver disease may get worse when you take anti-HIV medicines like REYATAZ (atazanavir sulfate).
- **Kidney stones** have been reported in patients taking REYATAZ. Signs or symptoms of kidney stones include pain in your side, blood in your urine, and pain when you urinate.
- **Some patients with hemophilia** have increased bleeding problems with protease inhibitor medicines like REYATAZ.

Changes in body fat have been seen in some patients taking anti-HIV medicines. The cause and long-term effects are not known at this time.

Other side effects of REYATAZ taken with other anti-HIV medicines include: nausea, headache, stomach pain, vomiting, diarrhea, depression, fever, dizziness, trouble sleeping, numbness, and tingling or burning of hands or feet.

You should take REYATAZ once daily with food (a meal or snack). You should take REYATAZ and your other anti-HIV medicines exactly as instructed by your healthcare provider.

Please see Important Patient Information about REYATAZ on the next page.

Bristol-Myers Squibb

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If you or someone you know needs help paying for medicine, call 1-888-4PPA-NOW (1-888-477-2669). Or go to www.pparx.org

Partnership for Prescription Assistance

PATIENT INFORMATION

℞ ONLY

REYATAZ® (RAY-ah-taz)

(generic name = **atazanavir sulfate**) **Capsules**

ALERT: Find out about medicines that should NOT be taken with REYATAZ (atazanavir sulfate). Read the section "What important information should I know about taking REYATAZ with other medicines?"

Read the Patient Information that comes with REYATAZ before you start using it and each time you get a refill. There may be new information. This leaflet provides a summary about REYATAZ and does not include everything there is to know about your medicine. This information does not take the place of talking with your healthcare provider about your medical condition or treatment.

What is REYATAZ?
REYATAZ is a prescription medicine used with other anti-HIV medicines to treat people who are infected with the human immunodeficiency virus (HIV). HIV is the virus that causes acquired immune deficiency syndrome (AIDS). REYATAZ is a type of anti-HIV medicine called a protease inhibitor. HIV infection destroys CD4+ (T) cells, which are important to the immune system. The immune system helps fight infection. After a large number of (T) cells are destroyed, AIDS develops. REYATAZ helps to block HIV protease, an enzyme that is needed for the HIV virus to multiply. REYATAZ may lower the amount of HIV in your blood, help your body keep its supply of CD4+ (T) cells, and reduce the risk of death and illness associated with HIV.

Does REYATAZ cure HIV or AIDS?
REYATAZ does not cure HIV infection or AIDS. At present there is no cure for HIV infection. People taking REYATAZ may still get opportunistic infections or other conditions that happen with HIV infection. Opportunistic infections are infections that develop because the immune system is weak. Some of these conditions are pneumonia, herpes virus infections, and *Mycobacterium avium* complex (MAC) infections. **It is very important that you see your healthcare provider regularly while taking REYATAZ.**

REYATAZ does not lower your chance of passing HIV to other people through sexual contact, sharing needles, or being exposed to your blood. For your health and the health of others, it is important to always practice safer sex by using a latex or polyurethane condom or other barrier to lower the chance of sexual contact with semen, vaginal secretions, or blood. Never use or share dirty needles.

Who should not take REYATAZ?
Do not take REYATAZ if you:
- **are taking certain medicines**. (See "What important information should I know about taking REYATAZ with other medicines?") Serious life-threatening side effects or death may happen. Before you take REYATAZ, tell your healthcare provider about all medicines you are taking or planning to take. These include other prescription and nonprescription medicines, vitamins, and herbal supplements.
- **are allergic to REYATAZ or to any of its ingredients.** The active ingredient is atazanavir sulfate. See the end of this leaflet for a complete list of ingredients in REYATAZ. Tell your healthcare provider if you think you have had an allergic reaction to any of these ingredients.

What should I tell my healthcare provider before I take REYATAZ?
Tell your healthcare provider:
- **If you are pregnant or planning to become pregnant**. It is not known if REYATAZ can harm your unborn baby. Pregnant women have experienced serious side effects when taking REYATAZ with other HIV medicines called nucleoside analogues. You and your healthcare provider will need to decide if REYATAZ is right for you. If you use REYATAZ while you are pregnant, talk to your healthcare provider about the Antiretroviral Pregnancy Registry.
- **If you are breast-feeding**. You should not breast-feed if you are HIV-positive because of the chance of passing HIV to your baby. Also, it is not known if REYATAZ can pass into your breast milk and if it can harm your baby. If you are a woman who has or will have a baby, talk with your healthcare provider about the best way to feed your baby.
- **If you have liver problems or are infected with the hepatitis B or C virus**. See "What are the possible side effects of REYATAZ?"
- **If you have diabetes**. See "What are the possible side effects of REYATAZ?"
- **If you have hemophilia**. See "What are the possible side effects of REYATAZ?"
- **About all the medicines you take** including prescription and nonprescription medicines, vitamins, and herbal supplements. Keep a list of your medicines with you to show your healthcare provider. For more information, see "What important information should I know about taking REYATAZ with other medicines?" and "Who should not take REYATAZ?" Some medicines can cause serious side effects if taken with REYATAZ.

How should I take REYATAZ?
- **Take REYATAZ once every day exactly as instructed by your healthcare provider**. Your healthcare provider will prescribe the amount of REYATAZ that is right for you.
  - For adults who have never taken anti-HIV medicines before, the usual dose is 400 mg (two 200-mg capsules) once daily taken with food.
  - For adults who have taken anti-HIV medicines in the past, the usual dose is 300 mg (one 300-mg capsule or two 150-mg capsules) plus 100 mg of NORVIR® (ritonavir) once daily taken with food.

  Your dose will depend on your liver function and on the other anti-HIV medicines that you are taking. REYATAZ is always used with other anti-HIV medicines. If you are taking REYATAZ with SUSTIVA® (efavirenz) or with VIREAD® (tenofovir disoproxil fumarate), you should also be taking NORVIR® (ritonavir).
- **Always take REYATAZ with food** (a meal or snack) to help it work better. Swallow the capsules whole. **Do not open the capsules**. Take REYATAZ at the same time each day.
- **If you are taking antacids or didanosine (VIDEX® or VIDEX® EC),** take REYATAZ 2 hours before or 1 hour after these medicines.
- **If you are taking medicines for indigestion, heartburn, or ulcers such as AXID® (nizatidine), PEPCID AC® (famotidine), TAGAMET® (cimetidine), or ZANTAC® (ranitidine),** talk to your healthcare provider.
- **Do not change your dose or stop taking REYATAZ without first talking with your healthcare provider**. It is important to stay under a healthcare provider's care while taking REYATAZ.
- **When your supply of REYATAZ starts to run low**, get more from your healthcare provider or pharmacy. It is important not to run out of REYATAZ. The amount of HIV in your blood may increase if the medicine is stopped for even a short time.
- **If you miss a dose of REYATAZ**, take it as soon as possible and then take your next scheduled dose at its regular time. If, however, it is within 6 hours of your next dose, do not take the missed dose. Wait and take the next dose at the regular time. Do not double the next dose. **It is important that you do not miss any doses of REYATAZ or your other anti-HIV medicines**.
- **If you take more than the prescribed dose of REYATAZ**, call your healthcare provider or poison control center right away.

Can children take REYATAZ?
REYATAZ has not been fully studied in children under 16 years of age. REYATAZ should not be used in babies under the age of 3 months.

What are the possible side effects of REYATAZ?
The following list of side effects is **not** complete. Report any new or continuing symptoms to your healthcare provider. If you have questions about side effects, ask your healthcare provider. Your healthcare provider may be able to help you manage these side effects.

The following side effects have been reported with REYATAZ:
- **rash** (redness and itching) sometimes occurs in patients taking REYATAZ, most often in the first few weeks after the medicine is started. Rashes usually go away within 2 weeks with no change in treatment. Tell your healthcare provider if rash occurs.
- **yellowing of the skin or eyes**. These effects may be due to increases in bilirubin levels in the blood (bilirubin is made by the liver). Call your healthcare provider if your skin or the white part of your eyes turn yellow. Although these effects may not be damaging to your liver, skin, or eyes, it is important to tell your healthcare provider promptly if they occur.
- **a change in the way your heart beats (heart rhythm change)**. Call your healthcare provider right away if you get dizzy or lightheaded. These could be symptoms of a heart problem.
- **diabetes and high blood sugar (hyperglycemia)** sometimes happen in patients taking protease inhibitor medicines like REYATAZ. Some patients had diabetes before taking protease inhibitors while others did not. Some patients may need changes in their diabetes medicine.
- **if you have liver disease** including hepatitis B or C, your liver disease may get worse when you take anti-HIV medicines like REYATAZ.
- **kidney stones** have been reported in patients taking REYATAZ (atazanavir sulfate). If you develop signs or symptoms of kidney stones (pain in your side, blood in your urine, pain when you urinate) tell your healthcare provider promptly.
- **some patients with hemophilia** have increased bleeding problems with protease inhibitors like REYATAZ.
- **changes in body fat**. These changes may include an increased amount of fat in the upper back and neck ("buffalo hump"), breast, and around the trunk. Loss of fat from the legs, arms, and face may also happen. The cause and long-term health effects of these conditions are not known at this time.

Other common side effects of REYATAZ taken with other anti-HIV medicines include nausea; headache; stomach pain; vomiting; diarrhea; depression; fever; dizziness; trouble sleeping; numbness, tingling, or burning of hands or feet; and muscle pain.

What important information should I know about taking REYATAZ with other medicines?
Do not take REYATAZ if you take the following medicines (not all brands may be listed; tell your healthcare provider about all the medicines you take). REYATAZ may cause serious, life-threatening side effects or death when used with these medicines.
- Ergot medicines: dihydroergotamine, ergonovine, ergotamine, and methylergonovine such as CAFERGOT®, MIGRANAL®, D.H.E. 45®, ergotrate maleate, METHERGINE®, and others (used for migraine headaches).
- HALCION® (triazolam, used for insomnia).
- VERSED® (midazolam, used for sedation).
- ORAP® (pimozide, used for Tourette's disorder).
- PROPULSID® (cisapride, used for certain stomach problems).

Do not take the following medicines with REYATAZ because of possible serious side effects:
- CAMPTOSAR® (irinotecan, used for cancer).
- CRIXIVAN® (indinavir, used for HIV infection). Both REYATAZ and CRIXIVAN sometimes cause increased levels of bilirubin in the blood.
- Cholesterol-lowering medicines MEVACOR® (lovastatin) or ZOCOR® (simvastatin).

Do not take the following medicines with REYATAZ because they may lower the amount of REYATAZ in your blood. This may lead to an increased HIV viral load. Resistance to REYATAZ or cross-resistance to other HIV medicines may develop:
- Rifampin (also known as RIMACTANE®, RIFADIN®, RIFATER®, or RIFAMATE®, used for tuberculosis).
- St. John's wort (*Hypericum perforatum*), an herbal product sold as a dietary supplement, or products containing St. John's wort.
- "Proton-pump inhibitors" used for indigestion, heartburn, or ulcers such as AcipHex® (rabeprazole), NEXIUM® (esomeprazole), PREVACID® (lansoprazole), PRILOSEC® (omeprazole), or PROTONIX® (pantoprazole).

Do not take the following medicine if you are taking REYATAZ and NORVIR® together.
- VFEND® (voriconazole).

The following medicines may require your healthcare provider to monitor your therapy more closely:
- CIALIS® (tadalafil), LEVITRA® (vardenafil), or VIAGRA® (sildenafil). REYATAZ may increase the chances of serious side effects that can happen with CIALIS, LEVITRA, or VIAGRA. Do not use CIALIS, LEVITRA, or VIAGRA while you are taking REYATAZ unless your healthcare provider tells you it is okay.
- LIPITOR® (atorvastatin). There is an increased chance of serious side effects if you take REYATAZ with this cholesterol-lowering medicine.
- Medicines for abnormal heart rhythm: CORDARONE® (amiodarone), lidocaine, quinidine (also known as CARDIOQUIN®, QUINIDEX®, and others).
- VASCOR® (bepridil, used for chest pain).
- COUMADIN® (warfarin).
- Tricyclic antidepressants such as ELAVIL® (amitriptyline), NORPRAMIN® (desipramine), SINEQUAN® (doxepin), SURMONTIL® (trimipramine), TOFRANIL® (imipramine), or VIVACTIL® (protriptyline).
- Medicines to prevent organ transplant rejection: SANDIMMUNE® or NEORAL® (cyclosporin), RAPAMUNE® (sirolimus), or PROGRAF® (tacrolimus).
- The antidepressant trazodone (DESYREL® and others).
- Fluticasone propionate (ADVAIR®, FLONASE®, FLOVENT®), given by nose or inhaled to treat allergic symptoms or asthma. Your doctor may choose not to keep you on fluticasone, especially if you are also taking NORVIR®.

The following medicines may require a change in the dose or dose schedule of either REYATAZ or the other medicine:
- FORTOVASE®, INVIRASE® (saquinavir).
- NORVIR® (ritonavir).
- SUSTIVA® (efavirenz).
- Antacids or buffered medicines.
- VIDEX® (didanosine).
- VIREAD® (tenofovir disoproxil fumarate).
- MYCOBUTIN® (rifabutin).
- Calcium channel blockers such as CARDIZEM® or TIAZAC® (diltiazem), COVERA-HS® or ISOPTIN SR® (verapamil), and others.
- BIAXIN® (clarithromycin).
- Medicines for indigestion, heartburn, or ulcers such as AXID® (nizatidine), PEPCID AC® (famotidine), TAGAMET® (cimetidine), or ZANTAC® (ranitidine).

Women who use birth control pills or "the patch" should choose a different kind of contraception. REYATAZ may affect the safety and effectiveness of birth control pills or the patch. Talk to your healthcare provider about choosing an effective contraceptive.

Remember:
1. **Know all the medicines you take.**
2. **Tell your healthcare provider about all the medicines you take.**
3. **Do not start a new medicine without talking to your healthcare provider.**

How should I store REYATAZ?
- Store REYATAZ Capsules at room temperature, 59° to 86° F (15° to 30° C). Do **not** store this medicine in a damp place such as a bathroom medicine cabinet or near the kitchen sink.
- Keep your medicine in a tightly closed container.
- Throw away REYATAZ when it is outdated or no longer needed by flushing it down the toilet or pouring it down the sink.

General information about REYATAZ
This medicine was prescribed for your particular condition. Do not use REYATAZ for another condition. Do not give REYATAZ to other people, even if they have the same symptoms you have. It may harm them. **Keep REYATAZ and all medicines out of the reach of children and pets.**

This summary does not include everything there is to know about REYATAZ. Medicines are sometimes prescribed for conditions that are not mentioned in patient information leaflets. Remember no written summary can replace careful discussion with your healthcare provider. If you would like more information, talk with your healthcare provider or you can call 1-800-321-1335.

What are the ingredients in REYATAZ?
Active Ingredient: atazanavir sulfate
Inactive Ingredients: Crospovidone, lactose monohydrate (milk sugar), magnesium stearate, gelatin, FD&C Blue #2, titanium dioxide, black iron oxide, red iron oxide, and yellow iron oxide.

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Bristol-Myers Squibb Company
Princeton, NJ 08543 U.S.A.

This Patient Information Leaflet has been approved by the U.S. Food and Drug Administration.

1193697A6 F1-B0001B-03-07 Rev March 2007

what's important and cultivate those gardens just as much as you cultivate your career. I do just that...balance. It can be difficult since I keep a home office and so does my partner, but we have set up things to make sure we spend quality time away from the computer and the telephone. We go out on dates every Friday and we have our "family shows" (*American Idol*, *Desperate Housewives*, and *Lost* & *Heroes*). With my friends, I just try to spend as much time with them that I can outside of being "Nathan Hale." We kick it, chill, and have a good time. Really, without those moments I would go crazy.

KB: *As you know, I am from St. Louis. Which is better, Chicago or St. Louis?*

NHW: Which is better a Maserati or a Mazda? Ask me a real question dammit! *(laughs)*

KB: *I know your mom is an important influence on your life. What advice has she given that has been helpful to your development?*

NHW: My mother has given me TONS of excellent advice. So much so that I told her she needs to write a book. The best pieces of advice she has given me are: 1) surround yourself with people who you want to be like and who are positive, hard working, and dedicated; 2) have integrity in everything you do; and 3) always strive to be your best with the goal of being THE best!

KB: *Where do you want to be five years from now?*

NHW: Happy and doing more of the same. Making movies and TV shows that touch people and make them feel good about themselves, humanity, and the future. Oh yeah, and I want some babies.

KB: *Okay, we'll talk about that later. Why is most of your programming geared towards minority audiences?*

NHW: Because we need it. We need more programming that doesn't play to the lowest common denominator. And, I always say you have to start with your base and then expand. If you always remember your base you'll be just fine.

KB: *What producers do you look up to? And who are some of your other influences?*

NHW: Lee Daniels was the first black gay man I ever knew to be a producer. I remember seeing him on the cover of *Venus* magazine *(I think)* and thinking, I want to do that. I want to make films with Halle Berry that win Oscars. And yes, I want to be out and doing it.

I look up to my mom. I look up to you... My friends. I have been very fortunate to be surrounded by the most positive and intelligent people in the world. I don't have to look far for positive influences and it's a tremendous blessing.

KB: *Your film Dirty Laundry is coming out this year. Are you excited about it and what should we expect?*

NHW: Excited is an understatement. Excited, anxious, crazy...you name it...I feel it. It's like having a child. I have seen and love the child, but now the rest of the world gets to see it. They better think my baby is cute. In all seriousness, I am just ready for it to be here. I expect it to have a huge impact. And hopefully, make a shit-load of money.

KB: *What advice would you give to an aspiring filmmaker?*

NHW: Get educated! In whatever field you want to be in, get educated. Have integrity. And believe in the impossible. I always say that moviemaking is magic and madness. You have to believe in magic to make movies. But, you also have to be educated so you can deal with the madness.

KB: *What do you like doing for fun?*

NHW: Traveling. Eating. Drinking. Playing with my friends.

KB: *Tell me something that people don't know about you that might surprise them?*

NHW: I like to be home. When I am in my house, I hate to leave. I really do... especially to parties. When you have to do it for a living it is far less attractive to you. I much prefer to stay at home and watch the boob tube or work.

KB: *How did you meet that hot guy you've been involved with for the past five years?*

NHW: He stalked me in the gym. We got him some psychiatric help and, then, we started dating *(laughs)*. We met in the gym. I fell in love on our first date and I have been in love ever since.

KB: *Ah, that's so nice. I feel the same way. So, how important are relationships and friendships to you?*

NHW: The most important things to me are my family and my friends. And, I know a lot of people say that, but for me, it's true. I always want them to be around me. I am very blessed to be loved and I want to return those blessings to the ones who give them to me.

KB: *What's the next project you're working on?*

NHW: Whew! My producing partner, Crystal McCrary Anthony, and I are working on a lot right now. We just started a second season of *Real Life Divas*. I am finishing a script called *All The Women I've Loved* based on the novel of the same name by Byron Harmon. We're probably going to shoot that next spring. We're also working on the feature films, *Homecourt Advantage* and *AG*, and producing a television movie called *Passing*. Finally, we have three TV shows in development: *Harlem*, *Swans*, and *Generation G*. We're what we call "stupid busy." I would also love to work with Eva again, so I am trying to think of something we can do together.

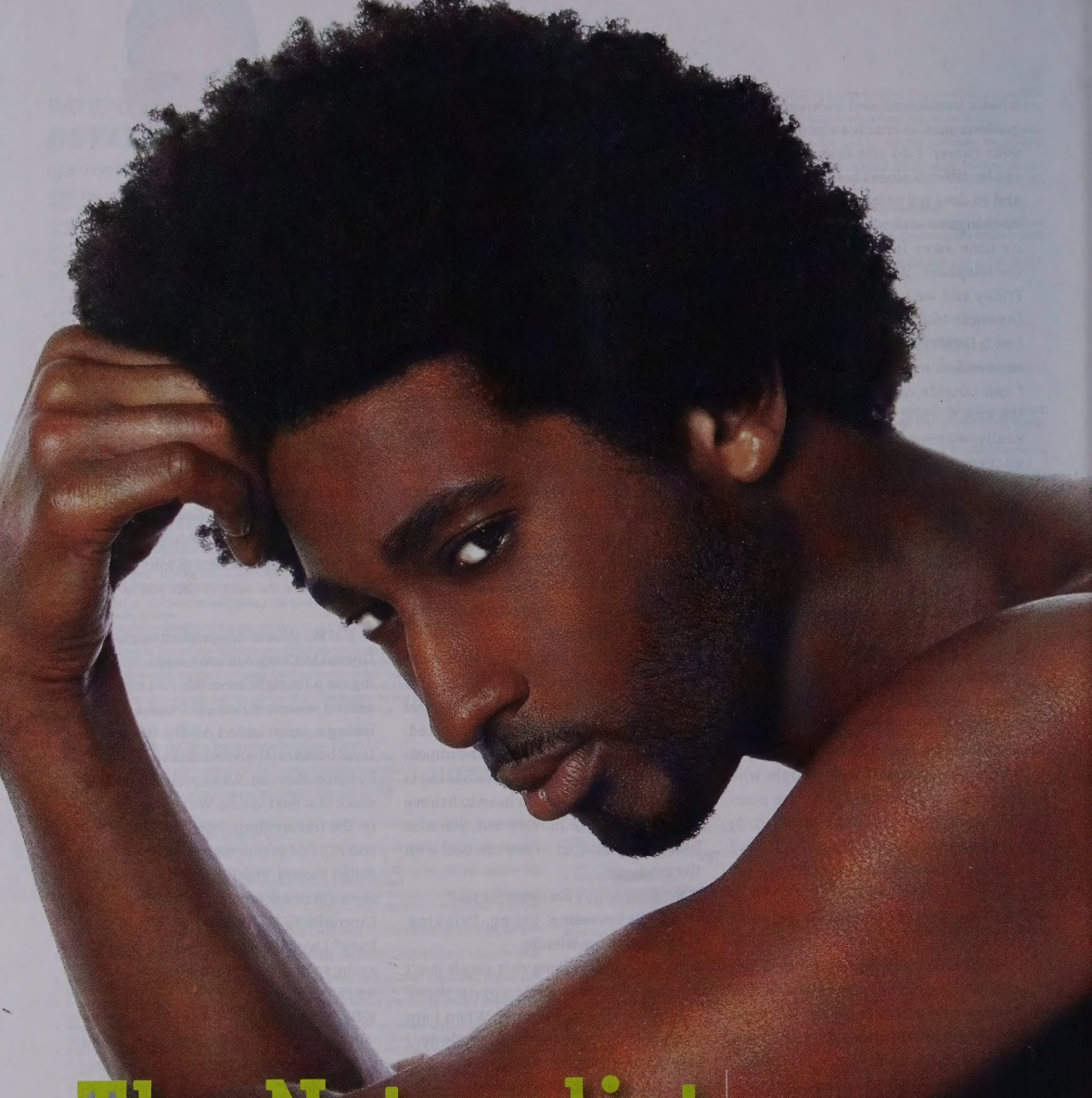
KB: *What's your life's motto?*

NHW: I have several: 1) Be excellent and fair! 2) "If opportunity doesn't knock, build a door!" – Milton Berle. 3) "Just do it!" – Nike. And, 4) "In life you must be tough and tender. If you're not tough, you'll never get anywhere. If you're not tender, you'll never stay there!" – Maya Angelou.

KB: *Well, I love what you're doing baby, and I love you, too. Thanks for doing the interview.*

NHW: Thank you, baby.

Keith Boykin is a best-selling author, political activist and co-host of BET's **My Two Cents**.



The Naturalist

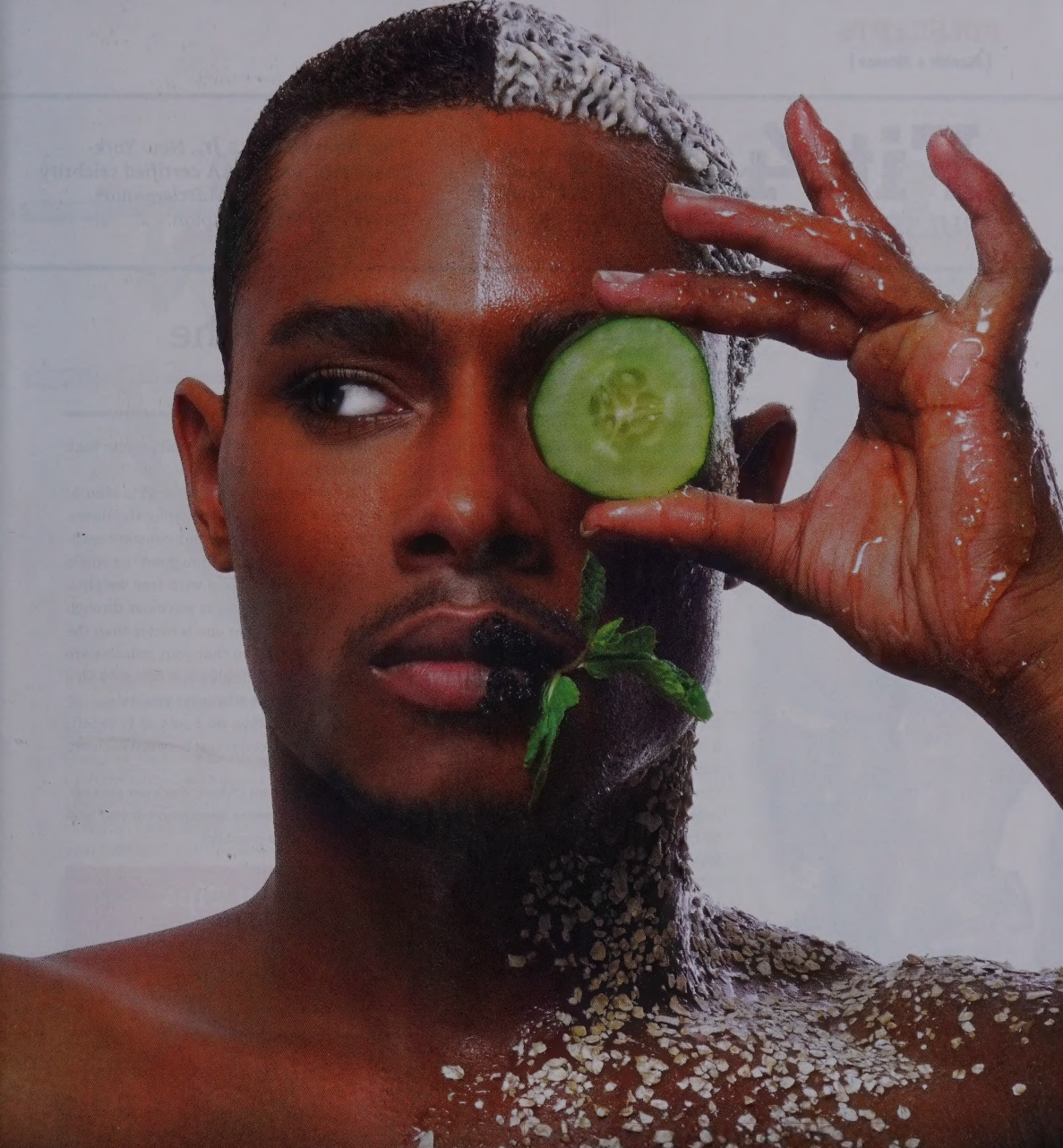
HAIR

A MAJESTIC AFRO, a lush tangle of dreads, and sleek cornrows are celebrations of our resilient "*hair-itage.*" Natural Hair is an expression of one's personality and sense of style, and for maintaining its beauty; there are a harvest of new products infused with natural ingredients. Whatever your *coif* of choice, nourish your mane with a balanced diet of magnanimous ingredients like shea butter, avocado, coconut, olive, cactus oil, sage, mayonnaise, rosemary, carrot oil, and egg. These are some of nature's best that bestow a bumper crop of rich vitamins and antioxidants. Couple luster with a clean, inviting fragrance and you'll earn a slot on everyone's best *tressed* lists.

by Zulekha Haywood

NATURE'S BEST:

Cantu: *Shea Butter After Shampoo Rinse Out Conditioner, 13.5 oz. $4,* ***Vigorol:*** *Olive Oil Deep Moisture Treatment & Hairdress, 7 oz., $6,* ***Carol's Daughter:*** *Tui Hair Oil, 2 oz., $8,* ***Hollywood Beauty:*** *Carrot Oil Root Moisturizer Hair Lotion, 12 oz. $3,* ***Rasta Locks Twist:*** *Jamaican Mango & Lime Cactus Oil Serum, 4 oz. $5.50*



SKIN IF IT'S WHOLESOME for your body, more than likely, it'll be equally good to your skin! But going green need not be expensive. Stretch your diet and dollar by incorporating some organic finds into your skincare regimen. Mix honey, almonds, sea salt, and oatmeal in a blender and slough off dead skin cells and city toxins. All skin types can enjoy the benefit of a 10-minute egg white mask to tighten pores, and fish oil from caviar has been proven to deter acne flare-ups. Use mayonnaise as an ideal scalp moisturizer, and try a sprig of mint for fresh breath all day. And, remember to soothe those tired puffy bloodshot eyes with a cooling slice of cucumber. So, experiment with what's in your kitchen to reveal your good looks, naturally.

Photos by Tarrice Love
Hair Model: William Elliot Springfield
Skin Model: Sammi

Fit 4 Life:

PULSE Guide to Fitness and Health

Tips from **Ulisses Jr.**, *New York-based ACE and AFAA certified celebrity fitness trainer and Musclemania® Superbody Pro Champion.*

Going Broad: Sculpting the Perfect Shoulders

First, thanks to all of our readers for their letters and emails in response to the last issue's feature on abs. I am very excited that you have chosen a healthier attitude towards achieving your fitness goals.

Last time, we were on the mat tightening our abdominal muscles, to reveal that sometimes elusive part of the anatomy, the six-pack. This time, we will focus on one of the body's smaller and often neglected muscle groups, the shoulders. Nice toned shoulders look awesome and can give your architecture the illusion of broadness. For instance, a broad pair of shoulders will make a guy with a wide waistline look slim-waisted. For those with a big butt, broad shoulders can help dramatically improve body proportions by creating balance between the upper and lower torso.

The shoulder is comprised of three muscle areas that work in unison: the front, side, and rear deltoids. To achieve a well-balanced, symmetrical pair of shoulders, it is essential that you train all three areas. Any shoulder exercise that involves a pressing motion would work all three, while raises and rowing exercises work one or the other. As with any workout regimen, when you train your shoulders, it is important that you pay attention to your form and perform each exercise correctly. Heavy weights using bad form can cause injury and probably will not give you the results you desire. Shoulders involve a complex network of bones, tendons, muscles, and cartilage and can be very fragile. Consequently, I strongly recommend that when doing any pressing exercises for your shoulders, that you stabilize your back against a pad.

Use either cables or free weights (dumbbells or a barbell) to train your shoulders. Cables allow you to maintain constant resistance on the muscles throughout the whole range of motion, while with free weights, the resistance changes as you move through the exercise. Neither one is better than the other, but to ensure that your muscles are challenged and stimulated, it is a good idea to mix both styles whenever you train.

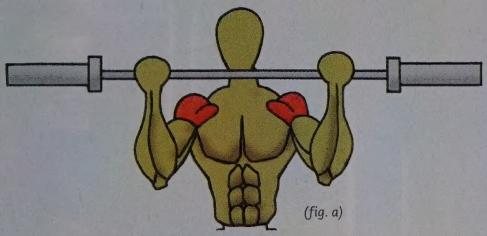
For each exercise, do 3 sets of 12 repetitions, with 30 seconds rest between each set.

For more info about Ulisses, check out ulissesjr.com. For his up coming appearances at your local Pride Event go to gmad.org.

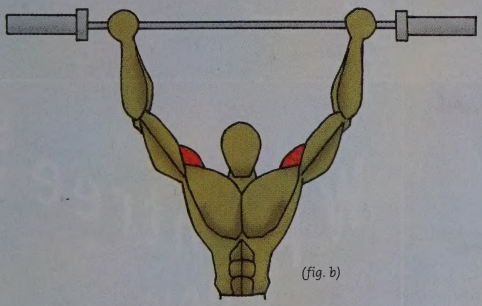
Healthy Tips

- Train hard and train smart, shoulders involve a few joint muscles which can easily cause injuries if trained incorrectly. Improper training can lead to neck and back pains.
- Use proper form with moderate weight; remember that you are trying to sculpt your shoulders so keep your reps high.
- Stay dedicated to your workouts.
- Keep your water intake high and maintain a good diet.

Photo by John Labbe Illustrations by Zuberi Zahur



(fig. a)



(fig. b)

FRONT MILITARY PRESS

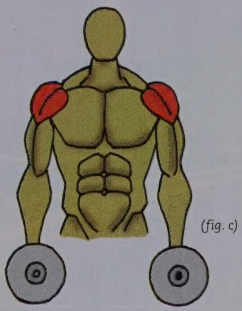
Target muscle: front, side, and rear deltoids

Sit on a low back bench with your feet flat on the floor and your back firmly against the back rest. Grab the barbell with palms facing forward, hands shoulder-width apart. Lift the bar off its rest and over your head. Slowly lower the bar in front of your face until your hands are just above shoulder height, inhaling as you do so (fig. a). Exhale as you slowly press the bar back over your head until your arms are fully extended, but make sure your elbows do not locked (fig. b).

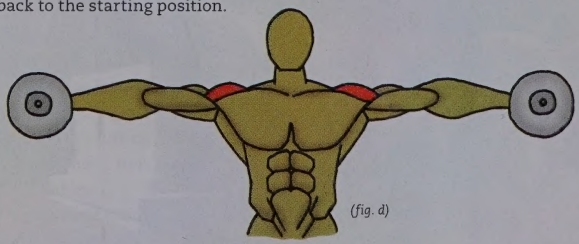
SIDE RAISES

(Target muscle: side deltoids)

Hold two dumbbells next to your thighs with your palms facing each other. Keep your elbows slightly bent. Stand with your feet shoulder-width apart and slightly bent (fig. c). Inhale as you slowly lift both dumbbells directly out to your sides until your elbows are at shoulder height. Your palms should be facing down at this point (fig. d). Exhale as you slowly lower the dumbbells back to the starting position.



(fig. c)



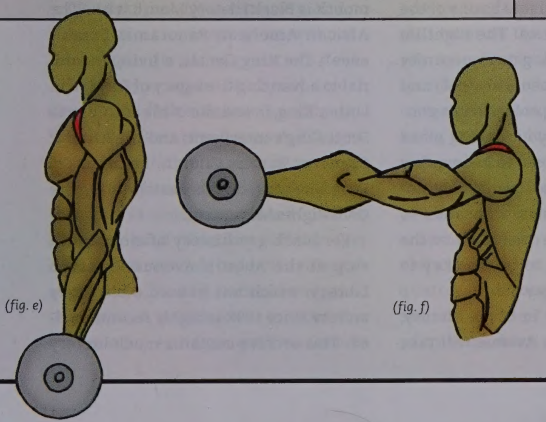
(fig. d)

SHRUGS

(Target muscle: trapezoids)

Your trapezoid muscles connect your upper back and shoulders so you can train them with either shoulder or back workouts. I recommend you train them with shoulders because back is a much bigger muscle group and it will save you time in the gym on back days.

Take two dumbbells and hold them at arms length along your side, move your shoulders up and down in a straight motion. When shrugging, you should try to make your shoulders touch your ears and always squeeze at the top when you contract the muscle.



(fig. e)

(fig. f)

FRONT RAISES

(Target muscle: front deltoids)

Grab dumbbells in both hands, making sure that you can comfortably raise the weight without discomfort or straining. With your back straight, shoulders rotated backwards, and knees slightly bent, stand with feet shoulder-width apart (fig. e). Inhale as you slowly lift one arm until the dumbbell is at eye level (fig. f). Exhale as you slowly lower the dumbbell to the starting position. Alternate the exercise with the other arm until you have completed a set.

KEY TO THE SOUTH

Atlanta AMERICA'S BLACK GAY MECCA

By Kevin E. Bynes

ATLANTA is without a doubt one of the hottest destinations for black gay men. While widely known because of its eminently famous Black Gay Pride, Atlanta is fast becoming the place to be year round. From New York and D.C. to Miami, Chicago, and California, gay men are converging on Atlanta in amazing numbers.

Even the Tom Joyner Morning Show recently referred to Atlanta as one of the gayest spots in America. The nightlife is jumping, the black gay community has a small town close-knit feel, and the climate for black professionals continues to thrive. Are you making plans to visit? Well, you'll need to know a few things about this amazing city that not only publicly welcomes thousands to the largest black pride celebration in the world, but is proving to be the "Key to The South" for black gay men.

Atlanta is steeped in black history. A drive down Auburn Avenue will take you past the Apex Museum, where every month is Black History Month with "The African American Panoramic Experience"; The King Center, a living memorial to advancing the legacy of Dr. Martin Luther King, Jr. and site of his and Coretta Scott King's interment; and the historic Ebenezer Baptist Church, home to Dr. King who served as its pastor during the Civil Rights Movement.

For black gay history aficionados, a stop at the Auburn Avenue Research Library, which has housed a black gay archive since 1997, is highly recommended. This archive contains much literary

history, including some rare and hard to find works. While on Auburn Avenue, why not stop at Negril, Atlanta's best Caribbean restaurant, where the brown-stewed fish and homemade sorrel are divine.

For an equally historic jaunt, take a walk down Peachtree Street, on which several sign posts mark famous civil war battles such as the Battle of Peachtree Creek of 1864, from which it gets its name. In the early 20th century, 66 Peachtree Street was the former location of the Crystal Palace, a barber shop whose owner is credited with laying the foundation for Atlanta's black middle class. A former slave, Alonzo Herndon, parlayed his hair cutting skills into the finest men's barbershop in Georgia. The Crystal Palace catered to white businessmen until it was badly damaged during Atlanta's 1906 race riots. With three successful barbershops, Herndon became one of Atlanta's wealthiest men, its first Black millionaire, and founded the Atlanta Mutual Insurance Association, later renamed Atlanta Life Insurance Company. The "Herndon Home" is a landmark listed in the National Register of Historic Places and a museum of Atlanta's black history that can be toured for a modest admission of $5.

Peachtree Street is also home to some of the city's most fabulous restaurants, hotels, bars, and clubs. A personal favorite, Mick's, a southern-styled bar and grill, offers a variety of down-home and Creole dishes in a casual atmosphere. With two locations in Midtown and one in Buckhead, Mick's gives you three opportunities to check out their trademark fried green tomatoes. And no Atlanta vacation is complete without a taste of Georgia's fried green tomatoes.

Before you leave Peachtree Street, check out what's known as Atlanta's "Black Gay Starbucks." It owes its popularity to seating along the huge street side window located at 7th and Peachtree. From this vantage point, casually observe shoppers, guys filing into Bulldogs (gay bar), and street trade headed to Atlanta's stroll located nearby. Once claiming your window seat, you'll soon be engrossed in conversation with a group of new friends. Afterwards, you can walk less than a block to eateries like Gordon Biersch (brewery restaurant), The Vortex (bar & grill), Noodle (trendy Pan-Asian) or Little Azio (brick-oven pizza & pasta) before hitting the dance floor at Bulldogs, whose back porch hosts some of the world's most competitive card games.

Shopper's delight in Lenox Square and Phipps Plaza, two of Atlanta's most upscale malls that are only a transit ride away from Peachtree Street. (MARTA offers both per-ride fares @ $1.75 and unlimited fares @ $13 per week). Located directly across from each other, these malls host just about every fashion retailer any discriminating fashionista needs to make their vacation complete. Bloomingdale's and Neiman Marcus at Lenox and Parisians and Nordstrom at Phipps are accompanied by a host of high-fashion boutiques including Armani, Burberry, Cartier, Gucci, Hermès, Versace, and Louis Vuitton.

But, Atlanta offers even more. At Lenox Square on Saturdays, you'll notice fewer kids shopping than you'll see hanging out, meeting up, and cruising. Most of them are getting their nightclubbing drag together at Filene's Basement right across the street, prior to sauntering over to Lenox Square to hang out. On Sunday afternoons, the masses come from all over the state to descend upon Piedmont Park to chill, fire up the grill, play volleyball, and take in the eye candy of the hotties flaunting body by Bally, while a younger group is "J-setting" in the park.

Popularized in the south, J-setting evolved from the antics of the "Prancing J-settes," a dance group formed in 1997 that escorted the Jackson State University marching band. This syncopated, spontaneously-choreographed form of competitive team dancing includes high kicks, splits, and feminized drum major antics all made up on the spot, a thrill to watch, and guaranteed to overwhelm you with excitement.

Lest we forget, the stories about hot clubs like Traxx, Loretta's, The Marquette, and recently Fusions where patrons show up "dressed to sweat" and party until dawn are legendary. Today, although more kids are dressed to impress, the party still goes on all week. With promoters competing to have the strongest drinks, best DJs, sexiest strippers, and hottest clientele, "the boyz" bounce from club to club. They are found on Sundays at Chaparral, shaking off the last of the weekend; Mondays at Jungle, enjoying the best of glam drag shows; at Atlanta Live on Tuesdays, The Mark on Wednesdays, Bulldogs on Thursdays, and usher in the weekend on Fridays at Club 708 where the ballroom kids hold court, while Towers II reigns for a mature crowd. And on Saturdays, it's back to Atlanta Live.

"...Atlanta as one of the gayest spots in America. The nightlife is jumping, the black gay community has a small town close-knit feel, and the climate for black professionals continues to thrive. Are you making plans to visit?"

Few other cities provide the down-home feeling, rich cultural and political history, professional opportunities, and trendy urban lifestyle that many black gay men treasure. Atlanta provides all of these things and more. So remember, when you visit Atlanta, after you comb the racks at Lenox and Phipps, reconnect with culture at Apex, get your party on at Atlanta Live, peep the eye candy at Piedmont Park, and down a good-sized helping of fried green tomatoes at Mick's, stop by Starbucks, and tell everyone I said "Hey!"

strategy for avoiding victimization or to guarantee protection. This approach is not without its risks.

"An out queen came in *thirsty*. They kept telling her to choose a man, but she was too thirsty to choose. She liked my man, so he and his boys lured her to a secluded part of the institution and while she was in the act, men started coming out of stairwells and locker rooms. They ran a train on her. After that she went into protective custody afraid for her life." recalls Keith. While the gang rape described is clear, determining what qualifies as consensual sex versus rape in a prison's intimidation laden context is murky.

Set ups that coerce victims into sex under the threat of violence are common. In some cases, "wolves" or protectors loan drugs, money, cigarettes, and other luxuries to indebt an inmate and create an obligation into having sex or even turning tricks as a payoff. Other regular scenarios include that of a protector "rescuing" an inmate from gang rape, in which the protector secretly orchestrates this with a group of cronies. Sexual slavery exist where "pimping" inmates for as little as $3 and "selling" inmates for up to $500 has been reported in some systems. And, finally, there is the practice of protectors assuming automatic ownership of their "wife's" property, requiring *her* to handle domestic chores and provide on-demand sexual services for the protector's gang. This is usually viewed by administrators as a consensual experience for gays or "turned out" victims.

Coercion also comes in the form of forcing openly gay men to choose a lover while in prison, a previously uncommon practice. Where relationships are consensual, there is no control over the length of time bonds will last, even as cellmates. A partner can be transferred or put in solitary confinement. Before you know it, there is a new cellmate disrupting your safe haven, and possibly threatening your life.

Like rape, sex isn't inevitable in prison. The overwhelming majority of incarcerated men do not engage in same-sex activities. Most who do (often just for sexual release) identify as heterosexual. Some considering themselves on the DL (down-low) will hide any activity from their buddies by deflecting attention with taunting transgender and openly gay men. Some gays also choose to avoid sex while in prison for safety reasons.

While violence, rape, and assaults are not the only threats to one's survival in prison, navigating the challenge of maintaining your mental and physical health can be just as treacherous. "You have to go in there and tell yourself this is going to be your home and mentally prepare yourself to deal with it," Rico exclaimed. "I tried to do the same thing every day; it helped the time go faster. If you let the time 'do you,' you'll go crazy." Then there are concerns about sexual health.

In state and federal prisons, 50 out of every 10,000 inmates are HIV-positive, making HIV rates for those incarcerated three times higher than the national average. With only two state prison systems in Vermont and Mississippi and five city jails (Philadelphia, New York City, Los Angeles, San Francisco and the District of Columbia) making condoms available for male inmates, the outlook for uninfected inmates staying negative isn't promising. Even if you manage to escape rape, avoiding HIV can be more than a notion. "People would try to find ways to protect themselves with plastic wrap from the kitchen, but, generally, they didn't protect themselves because they did not care." says Rico.

If one manages to survive the maze of confinement alive and relatively unscathed, a new challenge awaits. Society has a long unforgiving memory of criminal convictions and this landscape can be equally difficult to maneuver after completing time in prison. Of the 700,000 inmates to be released in 2007, the U.S. Department of Justice estimates that approximately 70% of them will return to prison within three years.

There are few guides available to prepare anyone for a stint in prison. However, it would be the ultimate "survival of the fittest" reality show. The HBO prison drama *Oz* may have given us outsiders a peak and a tome for institutional survival, but it isn't really how the game is. While *Oz* had authenticity in its depictions of the made-for-television testosterone-driven series, there is little that is sexy about actual prison isolation, doing hard time, and its mind-numbing routine. Multiple viewings of Adebisi and Beecher won't come close to preparing anyone for the long stretches of idle time, painful rejection of collect calls, stress of threatened violence, or the lustful eyes that offer chills instead of thrills. Like *Oz*, it appears the best way to survive prison drama is to never get cast in its lockdown at all.

"WHILE VIOLENCE, RAPE, AND ASSAULTS ARE NOT THE ONLY THREATS TO ONE'S SURVIVAL IN PRISON, NAVIGATING THE CHALLENGE OF MAINTAINING YOUR MENTAL AND PHYSICAL HEALTH CAN BE JUST AS TREACHEROUS."

Advertisement

Building Community

Up Close with ITLA, producers of Atlanta Black Pride—the world's largest Black Pride festival

In The Life Atlanta, Inc. has grown from a small network of friends who would host an annual park picnic into the world's largest Black Gay Pride festival since formally organizing more than 11 years ago.

Today, its annual Pride festival attracts more than 60,000 guests and visitors, offering an array of educational seminars, advocacy outreach opportunities, and stellar entertainment events that showcase the Black gay and same-gender-loving experience at its best.

Through its year-round programs ITLA is one of Black Gay America's crown jewels, working to celebrate, affirm and promote pride, unity and self-empowerment among gays and lesbians of African descent.

PULSE magazine talks with the members of ITLA's Board of Directors on what impact the organization is making in the lives of many and what the future holds for this vital community resource.

Organizational Rebirth

The task to help eradicate homophobia and the fight to increase the public's awareness of the issues that affect Black gays and lesbians is at times an overwhelming responsibility, we are encouraged by our efforts to provide safe and open spaces that showcase the talents and contributions we make to society.

Our Pride celebration is more than a weekend and more than a party, we are about building relationships that catapult change and mobilizes our community to stand up and represent.

Why Black Pride?

One of the questions we often receive is: why are Black Pride events separate from white gay pride events?

There are specific issues that face Black men and women that are different from issues that affect other groups. We live in a world where a person's race and ethnicity still, in many cases, poses a set of difficult challenges and so through our advocacy and programming we create vehicles address those issues.

We partner with the Atlanta Pride (the city's white pride organization) on a number of projects and are inclusive to the support and help of a host of great community allies who are not Black. The work of creating more tolerant environments for Black gays and lesbians cannot be done alone.

We are a supplement, another alternative that serves an underserved market and we are honored to be of service to that targeted demographic.

Moving Forward

We are working to really move ITLA forward as evident by our 2007 theme: Moving to the Next Level. Through our leadership and the work of our committed volunteers we've changed the look of the organization by redesigning our logo/website. We have been able to forge historic partnerships with the City of Atlanta, producers of Montreux Jazz Festival Atlanta and other groups that demonstrate our relevance. We look forward to implementing internal operational systems that will help us deliver a level of customer service we hope exceeds people's expectations. We are calling on those interested to bring their gifts and talents to the table to help us.

For more information log onto: www.inthelifeatl.com

In The Life Atlanta, Inc. Board of Directors. Back row (l to r): Raymond Duke, Anaré V. Holmes, Kenneth T. Jones, Michael Slaughter. Front row (l to r): Ebonee Bradford, Zandra Conway, Michael Caywood and D'Lovely Gibson. *Image/Julie Yarbrough of JY Photography.*

Highlights of ITLA's 2007 Atlanta Black Pride: Moving to the Next Level
Aug. 29-Sept. 3, Sheraton Atlanta Hotel, 165 Courtland Street NE

- One Night Only: Aretha Franklin in Concert
- A Conversation with Jonathan Plummer
- The See Us In The Life Film Festival
- SpeakFire Spoken Word and Poetry Slam
- From Broadway to Hollywood Fashion Show
- Literary Café
- Taking Pride in Healthy Living Expo
- Interfaith Service
- The Stand Up and Represent Pride March

HOLLA BACK

Real Talk with Jamal

A female friend I've experimented with in the past wants to have sex with me again. Even though I'm happy in my seven-year relationship with a guy, I have lately been dreaming about another encounter with this female while having sex with my lover. What do I do?

– Joseph (Los Angeles, CA)

Dear Joseph: The flag is crimson right now—don't do it! The first step is to sit somewhere with a calming beverage and conduct a full-scale investigation into what—beyond a steamy recollection—is motivating your desires for this woman. While you're at it ask yourself if there is anything missing in your bedroom that your partner (with his specific genitalia) can do to keep you focused. No matter what answers you reach, take the newfound clarity along with another calming beverage to your lover and talk. Let him in if you love him because if trust collapses you may need pricey contractors to build it back. After you've sorted this out take him into the bedroom and wear him down. Now, should the conversation turn left before you invite the other woman to the fun, please make sure that neither you nor your lover are insecure, overly possessive, or rigid. Even if this is all good, proceed with extreme caution. From what it sounds like, this woman is not interested in experimenting with your lover, too.

Is homosexuality really a sin? What is sin? Is it real or did we make it up?

– CLH (Atlanta, GA)

Dear CLH: We don't have enough space on this page for a conversation about sin (email me if you're burning for dialogue), but whether we should worry about the sin in our gaytivities gets into whether we strictly follow doctrine and, if so, whose, at which church, and with what text. It gets into my favorite argument (this one outside the pulpit) that since same-sex bumping is unnatural, it's a sin. If that's the case, we're in good company; for social grooming the pygmy chimpanzees like to get freaky (try penis fencing and female crotch-to-crotch rubbing) and about 100 species of reef fish are simultaneous hermaphrodites. In our part of the animal kingdom, we get into the whole issue of choice, which is baffling since most of the black DL community is comprised of men losing the fight against ironclad Christian expectation that we must be hypermasculine. This gets into a lot, and the answer is definitely more personal than academic. There's one certainty—this generation has swapped traditional religion for spiritual treading that allows them to find divinity, morality, and peace of mind in places less restrictive than doctrine. Maybe there you'll find your answer.

As a single straight woman, I find it hard to imagine the challenges of life with another woman. I think about the excessive emotion involved and the hormones going crazy. How are gay couples able to last so long?

– K. Mac (New York, NY)

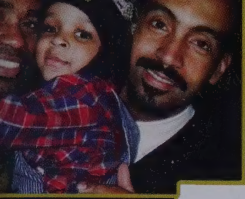
Dear K: Of course, there are no hard and fast rules for a cannonball-proof relationship, gay or otherwise. But the common thread I see in same-sex relationships that have lasted more than 10 years is that the couples have a level of self-actualization and honesty that withstands grenades like cheating, divergent career paths, and trust issues. Most of these men and women don't subscribe to the idea of traditional heterosexual role-playing, but instead respect each other's man- or womanhood in whatever incarnation. As Dr. Angelou says, nature likes balance, which is hard to create with two of the same anything, no doubt. Still it's about commitment and compromise, and if you succeed in finding your soul mate, the emotional and spiritual connection can transcend gender.

I'm a black gay man that has been single for over 10 years. Yes, I've gone out with guys during that time, but most dating situations usually only last 2 to 6 months. The longest relationship I've had lasted 9 months. It was suggested by a friend that maybe I should lower my standards as to the type of partner/mate I want in order to have a successful relationship. It's not that I'm looking for men with washboard abs, a homo-thug, or anything like that, but could my friend's advice be sound and, if so, is that fair to all parties involved?

– Edward (Nashville, TN)

Dear Edward: When you lower your standards you raze the self you've built, and then you have an incomplete person to offer some wonderful man. Perhaps modifying your deal breaker list is the better way to go. Unless you have a special machine (a la, Weird Science), it may be difficult to nab the upwardly-mobile, healthy, wealthy, talented, good-looking, brilliant, non-smoking, open-minded Adonis who lives in his own property own the more spacious side of the closet door, and has no tendency toward insecurity or clinginess. Since "perfect" as a concept is defeating from the jump, it may make more sense to shift some of these ideals to a priority list not entitled "Must Haves" and include the high-standard strong values—independence, strength, decency, consideration, honesty, and the like.

Jamal wants to hear from you. Send your questions to: HollaBack@pulsemag.org



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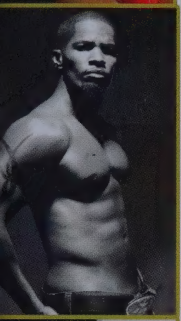
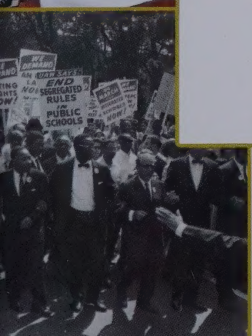
THE HEARTBEAT OF BLACK GAY AMERICA





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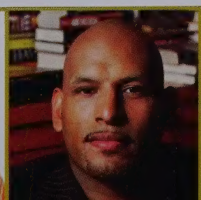

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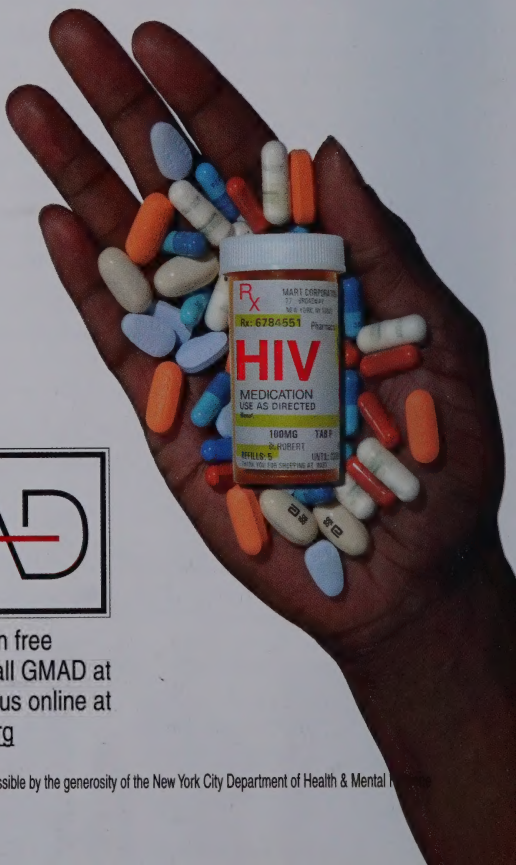

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